Chapter 12: Digestive System (Gastrointestinal)

Building a Medical Terminology Foundation 2e – Student Companion by Kimberlee Carter; Marie Rutherford; and Connie Stevens

This book intended companion to Building Medical Terminology Foundation (https://ecampusontario.pressbooks.pub/medicalterminology2/).

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Digestive System (Gastrointestinal)

If you would like to review the textbook chapter content, please visit **Chapter 12**: **Digestive System** (Gastrointestinal) [New Tab].

Learning Objectives

- · Identify the anatomy and describe the main functions of the digestive system and accessory structures
- · Analyze, translate, and define medical terms and common abbreviations of the digestive system
- Practice the spelling and pronunciation of digestive system medical terminology
- Identify the medical specialties associated with the digestive system and explore common diseases, disorders, diagnostic tests and procedures

Key Word Components

Identify meanings of key word components of the digestive system:

Prefixes

- hemi- (half)
- endo- (within, in)
- sub- (under, below)
- dys- (painful, abnormal, difficult, labored)

Combining Forms

- abdomin/o (abdomen, abdominal)
- an/o (anus)
- antr/o (antrum)
- · append/o (appendix)
- appendic/o (appendix)
- cec/o (cecum)
- · celi/o (abdomen, abdominal cavity)
- · cheil/o (lip)
- cholangi/o (bile duct)
- chol/e (gall, bile)
- choledoch/o (common bile duct)
- col/o (colon)
- colon/o (colon)
- diverticul/o (diverticulum)
- duoden/o (duodenum)
- enter/o (intestine)
- esophag/o (esophagus)
- gastr/o (stomach)
- gingiv/o (gum)
- gloss/o (tongue)
- hepat/o (liver)
- · herni/o (hernia, protrusion of an organ through a membrane or cavity wall)
- ile/o (ileum)
- jejun/o (jejunum)
- lapar/o (abdomen, abdominal cavity)
- lingu/o (tongue)
- or/o (mouth)
- palat/o (palate)
- pancreat/o (pancreas)
- peritone/o (peritoneum)
- polyp/o (polyp, small growth)
- proct/o (rectum)
- pylor/o (pylorus, pyloric sphincter)
- rect/o (rectum)
- sial/o (saliva, salivary gland)
- sigmoid/o (sigmoid colon)
- steat/o (fat)
- stomat/o (mouth)
- uvul/o (uvula)

Suffixes

- -ac (pertaining to)
- -al (pertaining to)
- -cele (hernia, protrusion)
- -centesis (surgical puncture to aspirate fluid)
- -ectomy (excision)
- -gram (the record, radiographic image)
- -graph (instrument used to record)
- graphy (process of recording)
- -ia (condition of, diseased state, abnormal state)
- · -iasis (condition)
- -itis (inflammation)
- logist (specialist or physician who studies and treats)
- logy (study of)
- -malacia (softening)
- -oma (tumor)
- · -osis (abnormal condition)
- -pathy (disease)
- -pepsia (digestion)
- -phagia (eating or swallowing)
- -plasty (surgical repair)
- -ptosis (prolapse, drooping)
- -rrhaphy (suturing, repairing)
- -rrhea (flow, discharge)
- -scope (instrument used for visualization)
- -scopy (process of viewing, visualization)
- -stomy (creation of an artificial opening)
- -tomy (incision, cut into)

Digestive System Words

Digestive System Medical Terms (Text Version)

Practice the following digestive system words by breaking into word parts and pronouncing.

1. gastroenterology (gastr/o/enter/o/logy)

- study of the stomach and intestines
- 2. cholecystitis (chol/e/cyst/itis)
 - inflammation of the gallbladder
- 3. proctoscope (proct/o/scope)
 - instrument used to view the rectum
- 4. pyloroplasty (pylor/o/plasty)
 - surgical repair of the pylorus
- 5. hepatomegaly (hepat/o/megaly)
 - enlarged liver
- 6. gastric (gastr/ic)
 - pertaining to the stomach
- 7. cholangiography (cholangi/o/graphy)
 - · radiographic imaging of the bile duct
- 8. gastroenterologist (gastr/o/enter/o/logist)
 - specialist who studies and treats stomach and intestines
- 9. cholangiogram (cholangi/o/gram)
 - · radiographic image of the bile duct
- 10. hepatoma (hepat/oma)
 - tumour of the liver
- 11. pancreatitis (pancreat/itis)
 - inflammation of the pancreas
- 12. esophagogram (esophag/o/gram)
 - radiographic image of the esophagus
- 13. steatosis (steat/osis)
 - · abnormal condition of fat
- 14. rectocele (rect/o/cele)
 - protrusion of the rectum
- 15. endoscope (endo/scope)
 - instrument used to view within (hollow organs)

16. abdominal (abdomin/al)

pertaining to the abdomen

17. proctoptosis (proct/o/ptosis)

condition of prolapse of the rectum

18. diverticulitis (diverticul/itis)

• inflammation of the diverticulum

19. oral (or/al)

pertaining to the mouth

20. appendectomy (append/ectomy)

excision of the appendix

21. esophagoscopy (esophag/o/scopy)

process of viewing the esophagus

22. cheilorrhaphy (cheil/o/rrhaphy)

• suturing of the lip

23. glossorrhaphy (gloss/o/rrhaphy)

suturing of the tongue

24. pyloromyotomy (pylor/o/my/o/tomy)

• incision into the pyloric muscle

25. gastroplasty (gastr/o/plasty)

surgical repair of the stomach

26. colectomy (col/ectomy)

· excision of the colon

27. sigmoidoscopy (sigmoid/o/scopy)

• process of viewing the sigmoid colon

28. palatitis (palat/itis)

• inflammation of the palate

29. esophageal (esophag/eal)

pertaining to the esophagus

30. colitis (col/itis)

• inflammation of the colon

31. ileocecal (ile/o/cec/al)

pertaining to the ileum and cecum

32. gastrectomy (gastr/ectomy)

excision of the stomach

33. anoplasty (an/o/plasty)

surgical repair of the anus

34. cholelithiasis (chole/lith/iasis)

condition of gallstones

35. gastroscopy (gastr/o/scopy)

process of viewing the stomach

36. colostomy(col/o/stomy)

· creation of an artificial opening in the colon

37. polyposis (polyp/osis)

• abnormal condition of (multiple) polyps

38. laparoscopy (lapar/o/scopy)

process of viewing the abdominal cavity

39. cholecystectomy (chole/cyst/ectomy)

• excision of the gallbladder to remove stones

40. glossitis (gloss/itis)

• inflammation of the tongue

41. cholangioma (cholangi/oma)

• tumour of the bile duct

42. pancreatic (pancreat/ic)

pertaining to the pancreas

43. stomatitis (stomat/itis)

• inflammation of the mouth

44. ileocecal (ile/o/cec/al)

pertaining to the ileum and cecum

45. nasogastric (nas/o/gastr/ic)

pertaining to the nose and stomach

46. proctoscopy (proct/o/scopy)

process of viewing the rectum

47. herniorrhaphy (herni/o/rrhaphy)

• suturing of a hernia

48. appendicitis (appendic/itis)

• inflammation of the appendix

49. gingivectomy (gingiv/ectomy)

excision of the gums

50. gastroenterocolitis (gastr/o/enter/o/col/itis)

• inflammation of the stomach, intestines, and colon

51. choledocholithotomy (choledoch/o/lith/o/tomy)

• incision into the common bile duct to remove stones

52. gastroscope (gastr/o/scope)

• instrument used to view the stomach

53. diverticulosis (diverticul/osis)

· abnormal condition of having diverticula

54. **uvulitis (uvul/itis)**

• inflammation of the uvula

55. dysphagia (dys/phagia)

· difficult swallowing

56. gastrostomy (gastr/o/stomy)

· creation of an artificial opening in the stomach

57. hemicolectomy (hemi/col/ectomy)

· excision of half of the colon

58. choledocholithiasis (choledoch/o/lith/iasis)

· condition of stones in the common bile duct

59. uvulectomy (uvul/ectomy)

- excision of the uvula
- 60. peritoneal (periton/eal)
 - pertaining to the peritoneum
- 61. ileostomy (ile/o/stomy)
 - · creation of an artificial opening in the ileum
- 62. steatorrhea (steat/o/rrhea)
 - · discharge of fat
- 63. sialolith (sial/o/lith)
 - stone in the salivary gland
- 64. proctology (proct/o/logy)
 - study of disease and disorders of the rectum
- 65. gastrojejunostomy (gastr/o/jejun/o/stomy)
 - · creation of an artificial opening between the stomach and the jejunum
- 66. rectal (rect/al)
 - pertaining to the rectum
- 67. gingivitis (gingiv/itis)
 - inflammation of the gums
- 68. colonoscopy (colon/o/scopy)
 - process of viewing the colon
- 69. colorectal (col/o/rect/al)
 - pertaining to the colon and rectum
- 70. anal (an/al)
 - pertaining to the anus
- 71. duodenal (duoden/al)
 - pertaining to the duodenum
- 72. abdominocentesis (abdomin/o/centesis)
 - surgical puncture to aspirate fluid from the abdomen
- 73. hepatitis (hepat/itis)
 - inflammation of the liver

74. laparoscope (lapar/o/scope)

· instrument used to view the abdominal cavity

75. antrectomy (antr/ectomy)

• excision of the antrum (of the stomach)

76. enterorrhaphy (enter/o/rrhaphy)

suturing of the intestine

77. esophagitis (esophag/itis)

• inflammation of the esophagus

78. uvulopalatopharyngoplasty (UPPP)

- uvul/o/palat/o/pharyng/o/plasty
- surgical repair of the uvula, palate, and pharynx

79. peritonitis (periton/itis)

• inflammation of the peritoneum

80. diverticulectomy (diverticul/ectomy)

• excision of the diverticula

81. enteropathy (enter/o/pathy)

disease of the intestines

82. proctologist (proct/o/logist)

• Specialist who studies and treats diseases of the rectum

83. gastritis (gastr/itis)

• inflammation of the stomach

84. abdominoplasty (abdomin/o/plasty)

• surgical repair of the abdomen

85. celiotomy (celi/o/tomy)

· incision into the abdominal cavity

86. gastroenteritis (gastr/o/enter/itis)

• inflammation of the stomach and intestines

87. endoscopy (endo/scopy)

process of viewing within (hollow organs)

88. palatoplasty (palat/o/plasty)

surgical repair of the palate

89. laparotomy (lapar/o/tomy)

incision into the abdominal cavity

90. colonoscope (colon/o/scope)

• instrument used to view the colon

91. polypectomy (polyp/ectomy)

excision of polyps

92. gastrojejunostomy (gastr/o/jejun/o/stomy)

· creation of an artificial opening between the stomach and the jejunum

93. CT colonography (CT colon/o/graphy)

radiographic imaging of the colon using computed tomography

94. esophagogastroduodenoscopy (EGD)

- esophag/o/gastr/o/duoden/o/scopy
- process of viewing the esophagus, stomach and duodenum

95. stomatogastric (stomat/o/gastr/ic)

pertaining to the mouth and stomach

96. celiac (celi/ac)

pertaining to the abdomen

97. gastromalacia (gastr/o/malacia)

softening of the stomach

98. dyspepsia (dys/pepsia)

· difficult digestion

99. esophagogastroplasty (esophag/o/gastr/o/plasty)

surgical repair of the esophagus and stomach

100. sublingual (sub/lingu/al)

pertaining to under the tongue

101. steatohepatitis (steat/o/hepat/itis)

• inflammation of liver associated with fat

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Pronouncing and Defining Digestive System Medical Terms

Digestive System terms (Text Version)

Practice the following **digestive system** medical terms that are not easily broken into word parts.

1. ascites

• abnormal intraperitoneal accumulation of fluid with large number of proteins and electrolytes

2. hemorrhoids

• distended and swollen veins in the rectum and anus

3. nausea

• urge to vomit

4. stoma

surgical opening between an organ and the surface of the body

5. adhesion

• band of scar tissue that binds anatomic surfaces to each other

6. emesis

· vomiting

7. cirrhosis

 $\circ~$ chronic degenerative disease of the liver

8. polyp

 $\circ \;\;$ small tumour-like growth that extends from the surface of a mucous membrane

9. feces

• stool, fecal matter

10. obesity

 $\circ~$ abnormal increase in the proportion of fat cells resulting in excess body weight for height

11. dysentery

• inflammation of the intestine presenting with abdominal pain and bloody diarrhea

12. melena

• black tarry stool that contains blood from the GI tract

13. flatus

· gas in the GI tract

14. reflux

· abnormal backward flow

15. palpate

 physical examination technique: The examiner feels for texture, size, consistency, and location of body parts with hands.

Activity source: Digestive System terms not easily broken down into word parts by Kimberlee Carter, from Building a Medical Terminology Foundation by Kimberlee Carter and Marie Rutherford, licensed under CC BY-4.0. /Text version added.

Pronouncing and Defining Commonly Abbreviated Digestive System Terms

Practice pronouncing and defining these commonly abbreviated digestive system terms:

- APR (abdominoperineal resection)
- BE (barium enema)
- EGD (esophagogastroduodenoscopy)
- ERCP (endoscopic retrograde cholangiopancreatography)
- EUS (endoscopic ultrasound)
- FOBT (fecal occult blood test)
- GERD (gastroesophageal reflux disease)
- GI (gastrointestinal)
- H.pylori (Helicobacter pylori)
- IBS (irritable bowel syndrome)
- N&V (nausea and vomiting)
- · PEG (percutaneous endoscopic gastrostomy)
- UC (ulcerative colitis)

- UGI (upper gastrointestinal)
- UPPP (uvulopalatopharyngoplasty)

Sorting Terms

Sort the terms from the word lists above into the following categories:

- Disease and Disorder (terms describing any deviation from normal structure and function)
- Diagnostic (terms related to process of identifying a disease, condition, or injury from its signs and symptoms)
- Therapeutic (terms related to treatment or curing of diseases)
- Anatomic (terms related to body structure)

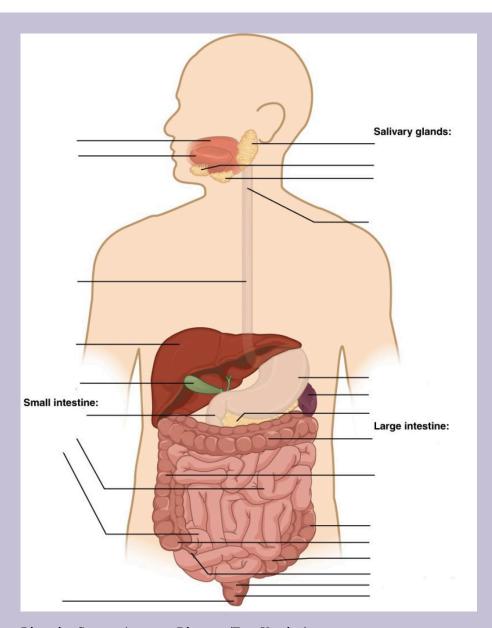
Digestive System Structures

Label the following digestive system anatomy:

Digestive System Anatomy (Text Version)

Label the diagram with correct words listed below:

1.	Gallbladder	9.	Anal canal	17.	Sublingual glan
2.	Mouth	10.	Parotid gland	18.	Ascending color
3.	Jejunum	11.	Descending colon	19.	Cecum
4.	Tongue	12.	Duodenum	20.	Stomach
5.	Ileum	13.	Esophagus	21.	Spleen
6.	Sigmoid colon	14.	Tranverse colon	22.	Rectum
7.	Liver	15.	Pharynx	23.	Appendix
8.	Submandibular gland	16.	Anus	24.	Pancreas
	<u>v</u>				



Digestive System Anatomy Diagram (Text Version)

This diagram shows an anterior view of the head and torso of the human body with the anatomical organs and structures comprising the digestive system identified. From the top working clockwise. Located in the mouth or oral cavity are three glands which secrete saliva containing enzymes to aid in digestion these include: _____[Blank 1], _____[Blank 2], and the ______[Blank 3]. When the ingested food is ready to leave the mouth, it is transferred to the throat to swallow, the throat is also known as the ______[Blank 4]. The _____[Blank 5] is a muscular hollow organ which aids in the digestive process by breaking down food for digestion. While the _____[Blank 6] located under the left portion of the diaphragm, helps to filter blood. The _____[Blank 7] is an accessory organ responsible for producing a hormone known as insulin and insulin is critical in the metabolism of sugars. The large intestines have many structural components _____[Blank 8],_____[Blank 9], _____[Blank 10], _____[Blank 11], and _[Blank 12] with these structures responsible for the final stage of digestion known as elimination. A small finger-like projections hangs from the cecum known as the ______[Blank 13] and this structure has a role in the development of the immune system in early human development. As a continuation of the sigmoid

digestive system and is a structure matter is expelled through the tensmall intestines divided into three 18] is the second part, and the organ of digestion and is responsi digestion. The[Blank 2 the bile to send to the gallbladder pharynx to the stomach it is responsively to the stomach it is responsively pharynx	e measuring about 3 to 4 cm lorminal opening in the digestive distinct parts; the is the third like the first puble for storing bile for when it if located in the upper right store for storage until it the bile is consible for gently moving the first mouth is responsible for mouth is responsible	is identified. Next, is the final segment of the ong known as the[Blank 15]. Fecal e system called the[Blank 16]. The d part[Blank 17], the[Blank 18], the process of ide of the abdomen is responsible for producing released. The[Blank 22] connects the food from the pharynx to the stomach. The poing the food around in the mouth during the known as the oral cavity contains the saliva in.
Medical Terms in Context		
Place the following medical term Digestive System(Text version)	s in context to complete the	scenario below:
Fill in the blanks using the following	ng list of words:	
polyppalpateobesityhemorrhoidsemesis	melenaflatusascitesfecesreflux	nauseacirrhosisdysenteryadhesionstoma
The Physician during an examinat of body parts with hands.	ion will[Blank 1]	to feel for texture, size, consistency and location
A[Blank 2] is a small tu	The second se	from the surface of a mucous membrane. rtion of fat cells resulting in excess body weight
for height. Distended and swollen veins in th	e rectum and anus are called	[Rlank 4]
The medical term for vomiting is		[Didnk 4].
[Blank 6] is black t		from the gastrointestinal tract.
[Blank 7] is the med		
Abnormal intraperitoneal accumu		

is fecal matter.		
Abnormal backward flow is called	[Blank 10].	
The urge to vomit is[Blan	k 11].	
[Blank 12] is a chronic deg	enerative disease of the liver due to alcoho	l abuse.
[Blank 13] is an inflamma	ation of the intestine presenting with abdor	ninal pain and bloody
diarrhea.		
A band of scar tissue that binds anatomic	surfaces to each other is called an	[Blank 14].
The surgical opening between an organ a	nd the surface of the body is called a $_{}$	[Blank 15].
Check your answers: ²		
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4.0. / Converted to Text.		

Medical Terms in Context

Place the following medical terms in context to complete the scenario below:

Digestive System - Consultation Report (Text version)

Use the words below to fill in the consultation report:

1. diarrhea 2. treatment 3. electrolytes 4. Glucose

5. resists walking 6. session

9. eves 10. gait

7. vomiting 8. stools

PATIENT NAME: Alex WEBB

AGE: 30

DOB: November 10

SEX: Male

CONSULTANT: Louis D. Wainwright, MD, Gastroenterology REQUESTING PHYSICIAN: Trevor Sharpe, MD, Family Medicine

REASON FOR CONSULTATION: Please evaluate GI distress.

I was asked to see this 30-year old male in consultation because of unremitting nausea, _____[Blank 1], [Blank 2], abdominal pain, dizziness, and low-grade fever. The patient has a poor appetite but reports no weight loss. He has noted some postprandial cramping, midepigastric pain, and unremitting diarrhea but no blood in the _____[Blank 3]. He states he is "healthier," but he still has some dizziness.

Initial treatment consisted of IV fluids and control of _____ _[Blank 4]. Thereafter, the patient was progressed to clear fluids and soft diet. He has done well on this routine; however, his dizziness has persisted. Fever has resolved.

On admission, the patient's lab data revealed CBC with hematocrit of 142, hemoglobin 25 with differential of neutrophils 51%, bands 8%, lymphocytes 26%, monocytes 6%, basophils none. Serum electrolytes were normal. Potassium was low at 3.5, BUN: creatinine ratio was normal[Blank 5] was within normal range. Stool studies were within normal.
On examination, I find the patient to be lethargic and uncomfortable with mild nausea and dizziness. He prefers to keep his eyes closed. On examination of the[Blank 6], I find no nystagmus. There is pallor to the skin, and he seems cool to the touch. Upon standing by the bedside, the patient is unsteady. Although he[Blank 7], when he attempts to walk, his[Blank 8] is halting, and he tends to fall to the left side. Abdomen is flat and nontender. Bowel sounds are WNL. Rectal exam deferred.
RECOMMENDATIONS: I think we should continue essential[Blank 9] of this gentleman. Because of the symptoms of dizziness on admission, we may want to consider a CT scan to rule out an intracerebral bleed or subdural hematoma. My opinion at this time is that we are dealing with a resolving[Blank 10] of gastritis.
Thank you for asking me to see this patient. I will be glad to follow him with you throughout his hospital stay.
Louis D. Wainwright, MD, Gastroenterology
Note: Report samples (H5P and Pressbooks) are to encourage learners to identify correct medical terminology and do not represent the Association for Health Documentation Integrity (AHDI) formatting standards.
Check your answers: ³
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Medical Terms in Context

Place the following medical terms in context to complete the scenario below:

Digestive System - Operative Report (Text version)

Use the words listed below to fill in the operative report:

- · esophagitis
- ulceration
- lateral
- stomach

- sporadicretroflexionbleeding

- antrum
- duodenum
- lidocaineduodenitis

PATIENT NAME: Bruce WEBSTER AGE: 48 SEX: Male DOB: September 23 DATE OF ADMISSION: July 2 DATE OF PROCEDURE: July 2 ADMITTING PHYSICIAN: Trevor Sharpe, MD, Family Medicine SURGEON: Louis D. Wainwright, MD, Gastroenterology
PREOPERATIVE DIAGNOSIS: GI Bleed. POSTOPERATIVE DIAGNOSES:
 Severe[Blank 1]. Gastroesophageal[Blank 2]. No Significant bleeding seen in the stomach.
OPERATIVE PROCEDURE: Gastrointestinal endoscopy. ANESTHESIA:[Blank 3] 1%.
PROCEDURE: The patient was placed into the left[Blank 4] position. A scope was introduced from the mouth, under visualization and advanced to the upper part of the[Blank 5], upper part of esophagus, middle of esophagus,[Blank 6] junction, and some[Blank 7] bleeding was seen at the GE junction. The scope was moved through the upper part of the stomach into the[Blank 8]. The[Blank 9] showed some inflammation and the scope was then brought out[Blank 10] was not performed. The scope was then brought back slowly. Mild[Blank 11] was also seen and a little bit of ulceration noted at GE junction.
CONCLUSION: Severe esophagitis, may be some source of[Blank 12] from there, but no active bleeding at this time.
Louis D. Wainwright, MD, Gastroenterology
Note: Report samples (H5P and Pressbooks) are to encourage learners to identify correct medical terminology and do not represent the Association for Health Documentation Integrity (AHDI) formatting standards.
Check your answers: ⁴
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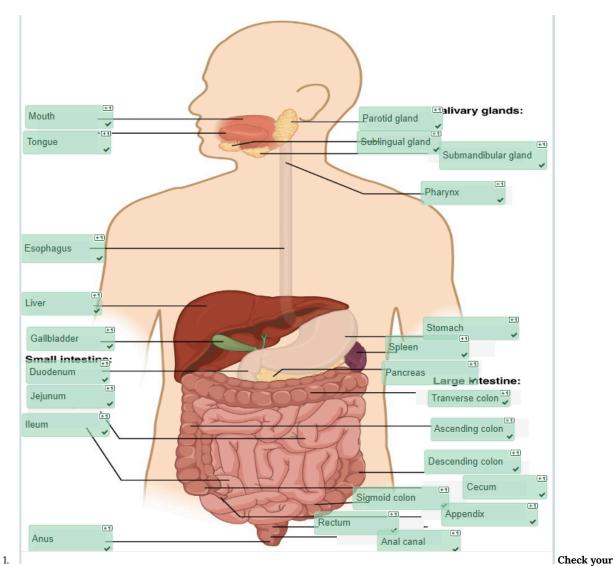
Test Your Knowledge

Test	your knowledge by answering the questions below:
	stive System Glossary Reinforcement Activity (Text version)
1.	[Blank 1] is a band of smooth muscle at the junction between the pylorus of the stomach and
	the duodenum of the small intestine.
	a. Ampulla
	b. Quadrate
	c. Pyloric sphincter
2.	Fatty tissue that stretches over the abdomen, plays a role in immune response and the growth of certain
	cancers is called[Blank 2].
	a. Fundus
	b. Convex
	c. Omentum
3.	The process of breaking down the fat into smaller blood cells which makes it easy for enzymes to
	function and digest food is called[Blank 3].
	a. Bicarbonate
	b. Malabsorption
	c. Emulsification
4.	[Blank 4] is the location where the diaphragm has a small opening through which the esophagus
	passes before connecting.
	a. Hiatal
	b. Lacteals
	c. Hilum
5.	Situated nearer to the center of the body or the point of attachment is the [Blank 5].
0.	
	a. Proximal
	b. Distal c. Quadrate
Chec	k your answers: ⁵
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Notes



answers: Digestive System Anatomy Diagram (Text Version) This diagram shows an anterior vies of the head and torso of the human body with the anatomical organs and structures comprising the digestive system identified. From the top working clockwise Located in the mouth or oral cavity are three glands which secrete saliva containing enzymes to aid in digestion these include: parotid gland, sublingual gland, and the submandibular gland. When the ingested food is ready to leave the mouth, it is transferred to the throat to swallow, the throat is also known as the **pharynx**. The **stomach** is a muscular hollow organ which aids in the digestive process by breaking down food for digestion. While the spleen located under the left portion of the diaphragm, helps to filter blood. The pancreas is an accessory organ responsible for producing a hormone known as insulin and insulin is critical in the

metabolism of sugars. The large intestines have many structural components transverse colon, ascending colon, descending colon, cecum, and sigmoid colon with these structures responsible for the final stage of digestion known as elimination. A small finger-like projections hangs from the cecum known as the appendix and this structure has a role in the development of the immune system in early human development. As a continuation of the sigmoid colon a hollow structure known as the rectum is identified. Next, is the final segment of the digestive system and is a structure measuring about 3 to 4 cm long known as the anal canal. Fecal matter is expelled through the terminal opening in the digestive system called the anus. The small intestines divided into three distinct parts; the is the third part ileum, the jejunum is the second part, and the duodenum is the first part. The gall bladder is an accessory organ of digestion and is responsible for storing bile for when it is needed to breakdown fats in the process of digestion. The liver located in the upper right side of the abdomen is responsible for producing the bile to send to the gallbladder for storage until it the bile is released. The **esophagus** connects the pharynx to the stomach it is responsible for gently moving the food from the pharynx to the stomach. The tongue located in the mouth is responsible for moving the food around in the mouth during the chewing or mastication process. The mouth also known as the oral cavity contains the saliva glands, the teeth and tongue and begins the process of digestion.

- 1. palpate, 2. polyp, 3. obesity, 4. hemorrhoids, 5. emesis, 6. melena, 7. flatus, 8.ascites, 9. feces, 10. reflux, 11. nausea, 12. cirrhosis, 13. dysentery, 14. adhesion, 15. stoma
- 3. 1.diarrhea, 2.vomiting, 3.stools, 4. electrolytes, 5.Glucose, 6.eyes, 7.resists walking, 8.gail 9.treatment, 10.session
- 4. 1. esophagitis, 2.ulceration, 3. lidocaine, 4.lateral, 5.stomach, 6.GE, 7.sporadic, 8.antrum, 9.duodenum, 10.retroflexion, 11.duodenitis, 12.bleeding
- 5. 1. Pyloric sphincter, 2. Omentum, 3. Emulsification, 4. Hiatal, 5. Proximal,

Digestive System Chapter 12 Worksheet



Digestive System Chapter 12 Worksheet

Instructions

Work through the chapter and find the meaning for the following prefixes, suffixes, and abbreviations. Add in any that are missing on the worksheet.

Prefixes and Suffixes

Prefix	Meaning	Suffix	Meaning
hemi-		-al	
endo-		-cele	
sub-		-centesis	
dys-		-ectomy	
		-gram	
		-graph	
		-graphy	
		-ia	
		-iasis	
		-itis	
		-logist	
		-logy	
		-malacia	
		-oma	
		-osis	
		-pathy	
		-pepsia	
		-phagia	
		-plasty	
		-ptosis	
		-rrhaphy	
		-rrhea	
		-scope	
		-scopy	
		-stomy	
		-tomy	

Abbreviations

Abbreviation	Meaning
APR	
BE	
EGD	
ERCP	
EUS	
FOBT	
GERD	
GI	
H.pylori	
IBS	
N&V	
PEG	
UC	
UGI	
UPPP	

Words easily broken into word parts listed by combining form (root)
Review of Word Parts

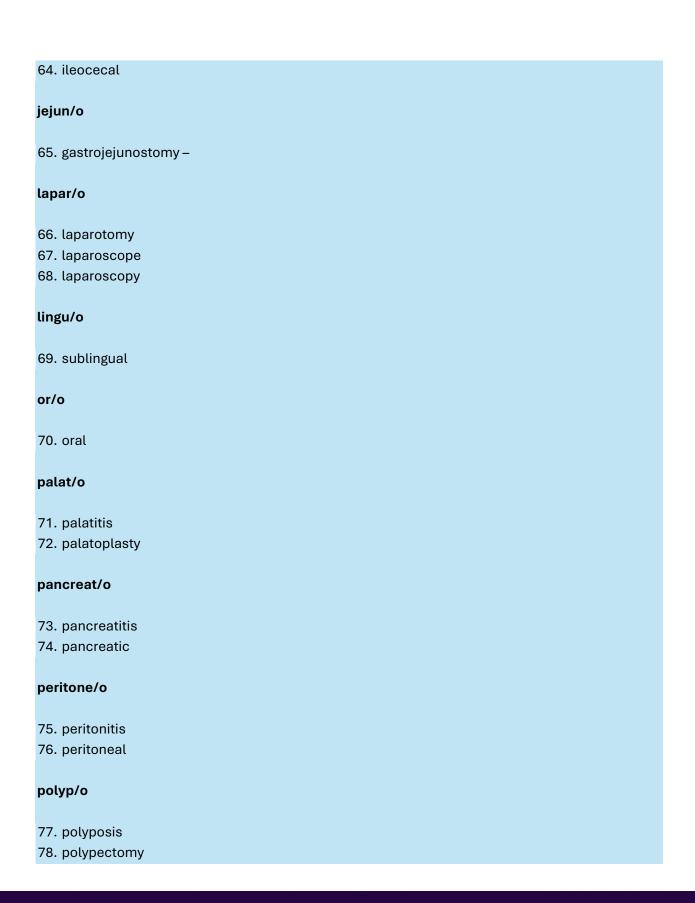
Please note that sometimes words are made up of word parts but are not translated literally. Several combining forms are shown in bold below. List their meaning from chapter 12.

abo	domin/o
2.	abdominocentesis abdominoplasty abdominal
an.	
	anoplasty anal
ant	tr/o
6.	antrectomy

append/o	
7. appende	ectomy
appendic/o	
8. appendi	citis
cec/o	
9. ileoceca	ι
celi/o	
10. celiotom	у
cheil/o	
12. cheilorrh	naphy
cholangi/o	
13. cholangi	oma
14. cholangi	
15. cholangi	ography
chol/e	
16. cholecys	etitis
17. cholelith	iasis
18. cholecys	stectomy
choledoch/	
19. choledo	cholithotomy
20. choledo	cholithiasis

col/o 21. colitis 22. colectomy 23. colostomy 24. colorectal 25. hemicolectomy colon/o 26. colonoscope 27. colonoscopy 28. CT colonography diverticul/o 29. diverticulitis 30. diverticulosis 31. diverticulectomy duoden/o 32. duodenal enter/o 33. enterorrhaphy 34. enteropathy esophag/o 35. esophagitis 36. esophagogastroplasty 37. esophagogastroduodenoscopy(EGD) 38. esophagogram 39. esophagoscopy 40. esophageal gastr/o

41. gastritis
42. gastroenteritis
43. gastroenterocolitis
44. gastrectomy
45. gastrojejunostomy
46. gastroplasty
47. gastroscope
48. gastroscope 49. gastroscopy
50. gastric
51. gastroenterologist
52. gastroenterology
53. gastromalacia
54. nasogastric
gingiv/o
55. gingivitis
56. gingivectomy
gloss/o
57. glossitis
58. glossorrhaphy
hepat/o
EQ homotitie
59. hepatitis
60. hepatoma 61. hepatomegaly
61. Hepatomegaty
herni/o
62. herniorrhaphy
ile/o
63. ileostomy



proct/o
79. proctoptosis
80. proctoscope
81. proctoscopy
82. proctologist
83. proctology
pylor/o
84. pyloromyotomy
85. pyloroplasty
rect/o
86. rectocele
87. rectal
sial/o
88. sialolith
sigmoid/o
89. sigmoidoscopy
steat/o
90. steatohepatitis
91. steatorrhea
92. steatosis
stomat/o
93. stomatitis
94. stomatogastric
uvul/o

95. uvulitis 96. uvulectomy 97. uvulopalatopharyngoplasty (UPPP)

Words without combining form:

98. endoscope

99. endoscopy

100. dyspepsia

101. dysphagia

Words not built from word parts that you should memorize:

102. adhesion103. cirrhosis

104. hemorrhoids

105. obesity

106. polyp

107. ascites

108. dysentery

109. emesis

110. feces

111. flatus

112. melena

113. nausea

114. palpate

115. reflux

116. stoma

ACTIVITY

Definitions Using Word Parts



(Digestive)

Definitions Using Word Parts - Digestive

Instructions

Type the terms from the numbered list found below. For each term keyed, divide the combining form, suffix, and prefix with a slash to show the individual word parts. Then define the term in your own words according to the rules provided in the resource (reading from the suffix, then back to the beginning of the word, then across). Be sure to number each term in your document.

Example

hepat/itis - inflammation of the liver

Define the following terms by breaking into word parts:

4	ΛL	٠.	mi	nal
	4	ากเ	mı	nai

- 2. Abdominocentesis
- 3. Appendectomy
- 4. Celiotomy
- 5. Cholangiography
- 6. Cholangioma
- 7. Cholecystectomy
- 8. Cholecystitis
- 9. Cholecystogram
- 10. Cholelithiasis
- 11. Colonography
- 12. Colonoscopy
- 13. Colorectal
- 14. Colostomy

15.	Diverticulitis
16.	Diverticulosis
17.	Duodenal
18.	Dyspepsia
19.	Dysphagia
20.	Enteropathy
21.	Enterorrhaphy
22.	Esophageal
23.	Esophagogastroduodenoscopy (EGD)
24.	Esophagogastroplasty
25.	Esophagogram
26.	Esophagoscopy
27.	Gastrectomy
28.	Gastroenteritis
29.	Gastroenterocolitis
30.	Gastroenterologist
31.	Gastroenterology
32.	Gastrointestinal
33.	Gastrojejunostomy
34.	Gastromalacia
35.	Gastroscope
36.	Gastrostomy

37.	Glossitis
38.	Hemicolectomy
39.	Hepatitis
40.	Hepatomegaly
41.	Herniorrhaphy
42.	Ileostomy
43.	Laparoscope
44.	Nasogastric
45.	Pancreatitis
46.	Peritonitis
47.	Polypectomy
48.	Polyposis
49.	Proctology
50.	Proctoscope
51.	Pyloric
52.	Rectocele
53.	Sialolith
54.	Sigmoidoscopy
55.	Steatorrhea
56.	Steatosis
57.	Sublingual
58.	Uvulectomy

-MM

(Digestive)

Scenario - Digestive

Instructions

Read aloud the following paragraph, paying close attention to the correct pronunciation of each medical term. Use the phonetic spelling provided with the term to guide you. At the conclusion of reading the paragraph and using this document, compose a list of the bolded medical terms and translate their correct meaning. Be sure to number each term in your list.

Scenario 1: Lower Digestive

Jordan began having diarrhea (dī-ă-RĒ-ă) and crampy abdominal (ab-DOM-ĭ-năl) pain for what seemed to him to be "all the time". Jordan's gastrointestinal issues weren't just after he ate something. His family doctor, Dr. Wilson, referred Jordan to a gastroenterologist (găs-trō-ĕn-tĕr-ŎL-ă-jĭst). Dr. Wilson wanted to rule out Crohn's disease (KRŌNS diz-ĒZ), irritable bowel syndrome (IBS) (ĬR-ĭ-tāt-ĭv BOW-ĕl SĬN-drōm) and colorectal cancer (kō-lŏ-REK-tăl KAN-sĕr).

Prior to the appointment with Dr. Ileus, Jordan provided a stool (stool) specimen for culture and to test for fecal occult blood (FĒ-kăl ŏ-KŬLT blŭd). Dr. Ileus, who specializes in gastroenterology (găs-trō-ĕn-tĕr-ŎL-ă-jē), also ordered a colonoscopy (kō-lŏ-NOS-kŏ-pē), a capsule endoscopy (en-DOS-kŏ-pē), a CT colonography (CT kŏ-lo-NO-gră-fē) and an esophagogastroduodenoscopy (ē-sof-ă-gō-gas-trō-doo-ŏ-dē-NOS-kŏ-pē). During Jordan's appointment, Dr. Ileus began educating Jordan on risk factors and signs and symptoms to look for as warning signs to cancer because many people do not show symptoms until the tumor is quite advanced. Symptoms of cancer vary depending on the location of the tumor. Common warning signs are altered bowel (BŎW-ăl) habits, rectal (REK-tăl) bleeding, abdominal (ab-DOM-ĭ-năl) cramps, flatus (FLĀ-tŭs) and bloating, iron deficiency anemia and weight loss.

Keeping this information in mind, Dr. Ileus noted an oral history of Jordan's diet and bowel habits, and the physical assessment included a **digital rectal examination (DIJ-ĭt-ăl RĔK-tăl eg-zam-ĭ-NĀ-shŏn)** to rule out the presence of polyps.

Scenario 2: Upper Digestive

Manny Quinn, a 42-year-old male, was referred by his Primary Care Physician (PCP) to evaluate his complaints of **dyspepsia** (**dis-PEP-shă**, sē-ă), anorexia, diarrhea, nausea, emesis, and right upper quadrant (RUQ) pain, which has been going on for the past three weeks. Manny described to the doctor that his stool looked funny and had an increased foul odor of late. However, Manny admits that he has noticed a change in bowel habits over the past three months.

Dr. Ileus, the **gastroenterologist** (**găs-trō-ĕn-tĕr-ŎL-ă-jĭst**), interrupted Manny and asked him more questions about his stool to rule out **steatorrhea** (**stē-ă-tō-RĒ-ă**). Manny admits to eating a high-fat diet, especially on the weekends.

Continuing with Manny's health history, Dr. Ileus learns Manny has **gastroesophageal reflux disease (GERD) (găs-trō-ĕ-sof-ă-JĒ-ăl RĒ-flŭks diz-ĒZ)** and was treated for **cholecystitis (kō-lĕ-sis-TĪT-ĭs)** eight years ago. With the pain complaints Manny is admitting to, Dr. Ileus had asked if he could be experiencing **cholelithiasis (kō-li-lith-Ī-ă-sĭs)** or gallstones?

Manny denies a history of having peptic ulcers, Crohn's Disease, or **ulcerative colitis (UL-sĕr-ă-tiv kō-LĪT-ĭs)**. Given his history of GERD and cholecystitis, the gastroenterologist had asked Manny if he has ever undergone an **esophagoscopy (ĕ-sof-ă-GOS-kŏ-pē)**, a **laparoscopy (lap-ă-ROS-kŏ-pē)**, or an **esophagogastroduodenoscopy (ē-sof-ă-gō-gas-trō-doo-ŏ-dē-NOS-kŏ-pē) (EGD)**.

Dr. Ileus thinks Manny is having a reoccurrence of cholecystitis due to the presence of gallstones and feels he may need a **cholecystectomy** (kō-lĕ-sis-TEK-tŏ-mē).