Medical Terminology
An Illustrated Guide
SIXTH EDITION

Barbara Janson Cohen, MEd
Preface

Every career in health care begins with learning the vast and challenging language of medical terminology. Without adequate learning and teaching resources, it can be an overwhelming challenge for students and faculty. This sixth edition of Medical Terminology: An Illustrated Guide meets that challenge with clear organization, many full-color illustrations with a strong clinical focus, a wide array of effective pedagogical features, a variety of activities, and useful ancillaries to make teaching and learning more effective. Because the content is so accessible and logically organized, the text can be used as part of classroom instruction, for independent study, or for distance learning.

Organization and Approach

Medical Terminology: An Illustrated Guide, 6th Edition, takes a stepwise approach to learning the language of medical terminology. Part I describes how medical terms are built from separate word parts and gives an overview of body structure. Part II introduces concepts of disease and treatment. Students should study these chapters before proceeding to Part III, which describes each of the body systems. While using the systems approach common to anatomy and physiology texts, this book alters the typical sequence to present systems of the most general medical importance first, the cardiovascular and respiratory systems, for example, followed by chapters on the more focused medical specialties. Individual chapters build on knowledge in stages. The Key Terms sections list the terms most commonly used; more specialized terms are included in a later section entitled “Supplementary Terms.” Students may study the latter terms according to the time available and their needs.

Each chapter opens with an indexed chapter outline, a list of student objectives—goals to be accomplished by the completion of the chapter—and a chapter pretest, testing a student’s previous knowledge to measure progress. In Part III, the chapters begin with an overview of the normal structure and function of the system under study, followed by a list of key terms with definitions and mention of some roots. Word parts related to each topic are then presented and illustrated, along with exercises on the new material. Next, there is an overview of clinical information pertaining to the system, also followed by a list of key terms with definitions. Most chapters contain reference boxes that unify and simplify material on specific topics. There are also special interest boxes on health care professions, clinical topics, and word derivations and usage.

Pedagogical Features

Features of Medical Terminology: An Illustrated Guide, 6th Edition, have been designed to bring the content alive and to aid in understanding and retention (also see the User’s Guide).

- Illustrations—Detailed, full-color drawings and photographs illuminate the chapters. These include clinical photographs and tissue micrographs. The many figures amplify and clarify the text and are particularly helpful for visual learners.
- Pronunciations—This text places great emphasis on pronunciation, and phonetic pronunciations are included with all new terms. It is important to practice saying these words and to be able to recognize them when they are heard.
- Pretests—Short quizzes to test previous knowledge begin each chapter. Students should take each quiz before starting the chapter and again after completing the chapter in order to measure progress.
- Exercises—Exercises accompany the introduction of all material, and review exercises conclude each chapter. Many of the illustrations have corresponding labeling exercises accompanied by helpful alphabetical word lists. All answers are included in the Answer Key at the end of the book. Students are actively involved in the learning process by answering questions on new material, checking answers with the answer keys, correcting mistakes, and keeping track of progress with review exercises.
- Use of Dictionaries—Word exercises that may require dictionary use are included in chapter review exercises. Some information on medical dictionaries is given in Chapter 1. Appendix 9 provides a sample page from a medical dictionary with information on how it is used.
- Case Studies—Case studies that present terminology in the context of a medical report are included in all chapters, followed by related questions. Professionals in a variety of health occupations figure in these scenarios to represent the diverse work settings students may encounter. Because they may include information learned in a previous chapter, the case studies also serve as an excellent review. Understanding these cases, especially those in the early parts of the book, may seem challenging for students, but much of the information needed to answer the questions is given in the histories, and students should make their best efforts to figure out the answers. These can be verified with the Answer Key.

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Preface

Glossaries of Word Parts—In working through the exercises, students can refer to complementary lists at the end of the text. Appendix 3 lists word parts and their meanings, and Appendix 4 lists meanings with corresponding word parts. Appendices 5 through 7 have lists of roots, suffixes, and prefixes alone. The remaining appendices include symbols, abbreviations, and units of the metric system.

Flashcards—Because flashcards offer an excellent way to learn this new vocabulary, a section with more than 100 flashcards is included at the back of the text. Flashcard content is presented in chapter order so that the cards can be removed in sequence as students progress through the book. Students can make additional cards to match the cards in the book by cutting 3 × 5 cards in half. The Student Resources website provides printable flashcards and the capacity to make unlimited additional cards.

Students are also encouraged to create their own learning aids, such as devising a practice test by covering lists of words and testing themselves on the definitions, or by covering definitions and testing themselves on the words. The same can be done with the charts on word parts and their definitions. It is also helpful for students to keep a personal list of words that they find difficult to spell or pronounce.

Instructor Ancillary Package

A strong package of ancillary materials is available to instructors with this edition. All resources are available to approved adopting instructors online at http://thePoint.lww.com/CohenMedTerm6e. These resources include the following:

- PowerPoint slides for each chapter organized by learning objectives
- Lesson plans for each chapter, organized around the learning objectives, and include lecture notes and in-class activities and assignments
- Word search activities
- Fill-in-the-blank tables
- Image bank of all images from the text
- Instructor's Test Generator with more than 500 questions in different formats (multiple choice, true–false, fill-in-the-blank, and matching)
- WebCT and Blackboard-ready Cartridge, which allows you to integrate the ancillary materials, by exercise type, into learning management systems

Summary

Acknowledgments

In preparing this 6th edition of *Medical Terminology: An Illustrated Guide*, my thanks go, once again, to the talented and dedicated staff at Lippincott Williams & Wilkins. Senior Publisher, Julie Stegman, and Product Director, Eric Branger, were at the helm of this project. Erin Cosyn, Associate Product Manager, Amy Rowland, Editorial Assistant, and Heather Rybacki, Senior Production Manager, handled the innumerable daily tasks required for publication of a textbook. Production Manager, Richard Rosenberg, took charge of the electronic ancillaries and their placement on thePoint. Allison Noplock was in charge of marketing.

Thanks once more to my able contributor, Jason James Taylor, who wrote many of the special interest boxes that appear in the text and also created all of the original student and instructor resource materials.

I truly appreciate the efforts of the many reviewers who have evaluated past editions of the book as well as this new edition. Their suggestions have greatly improved this text over the years.

For perennially needed advice and assistance, I thank my husband, Matthew, an instructor of anatomy and physiology.

Barbara Janson Cohen
We gratefully acknowledge the generous contributions of the manuscript reviewers whose names appear in the list that follows:

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Medical Terminology: An Illustrated Guide, 6th Edition, was created and developed to help you master the language of medicine. The tools and features in the text will help you work through the material presented. Please take a few moments to look through this User’s Guide, which will introduce you to the features that will enhance your learning experience.

Chapter Contents, Objectives, and Pretests

Chapter Contents and Objectives help you identify learning goals and familiarize yourself with the materials covered in the chapter. Chapter Pretests quiz students on previous knowledge at the beginning of each chapter. Students should take each Chapter Pretest before starting the chapter and again after completing the chapter in order to measure progress.
Detailed Illustrations

Illustrations: Detailed, full-color drawings and photographs illuminate the chapters. These include clinical photographs and tissue micrographs. The many figures amplify and clarify the text and are particularly helpful for visual learners.
Feature Boxes

Feature Boxes Call Out Important Information

Focus on Words provide historical or other interesting information on select terms within a chapter.

Clinical Perspectives focus on body processing as well as techniques used in clinical settings.

Health Professions focus on a variety of health careers, showing how the knowledge of medical terminology is applied in real-world careers.

For Your Reference provide supplemental information for terms within a chapter.
**Word Part Tables**

### Detailed Tables

Present roots, prefixes, and suffixes covered in each chapter in an easy-to-reference format (with examples of their use in medical terminology).

#### Table 15-4  Roots Pertaining to Pregnancy and Birth

<table>
<thead>
<tr>
<th>Root Meaning</th>
<th>Example</th>
<th>Definition of Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>amnio</td>
<td>amnion, amniotic sac</td>
<td>dia-</td>
</tr>
<tr>
<td>em-bryo</td>
<td>embryo</td>
<td>em-bryo</td>
</tr>
<tr>
<td>fe-tus</td>
<td>fetus</td>
<td>fe-tus</td>
</tr>
<tr>
<td>la-bo-r</td>
<td>labor</td>
<td>la-bo-r</td>
</tr>
<tr>
<td>na-ti</td>
<td>birth</td>
<td>na-ti</td>
</tr>
<tr>
<td>la-c-ot</td>
<td>milk</td>
<td>la-c-ot</td>
</tr>
<tr>
<td>gal-ac-ol</td>
<td>milk</td>
<td>gal-ac-ol</td>
</tr>
<tr>
<td>grav-id-a</td>
<td>pregnant woman</td>
<td>grav-id-a</td>
</tr>
<tr>
<td>para</td>
<td>woman who has given birth</td>
<td>para</td>
</tr>
</tbody>
</table>

**Word Part Knowledge** aids in the learning and understanding of common terminology.

### EXERCISE 15-4

**Define the following words:**

1. prenatal (pre-na-tal)
2. embryogenesis (em-bri-o-ger-e-sis)
3. ovum (ov-um)
4. feto-scopy (fe-to-sko-py)
5. mono-amnion (mon-o-am-ne-OT-ik)
6. galact-ea (ga-lak-t-e-ah)
7. hyperlactation (hi-per-lak-ta-shun)

**Use the appropriate roots to write words for the following:**

8. study of an embryo
9. study of the newborn
10. any disease of an embryo
11. cell (-cyte) found in amniotic fluid
12. incision of the amnion (to induce labor)
13. instrument for endoscopic examination of the fetus
14. rupture of the amniotic sac
15. after birth
16. woman who is pregnant for the first time
17. woman who has been pregnant two or more times
18. woman who has never given birth
19. woman who has given birth to one child
20. dry labor
21. slow labor
22. discharge of milk
23. cystic enlargement (-cele) of a milk duct

### Exercises

**Exercises** designed to test your knowledge before you move to the next learning topic that follows each table.
## Term Tables

### Key Terms

*Key Terms* include the most commonly used terms.

### Supplementary Terms

*Supplementary Terms* list more specialized terms.

### Abbreviations

*Abbreviations* for common terms.

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### Terminology

#### FEMALE REPRODUCTIVE SYSTEM

**Normal Structure and Function**

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>cervix</td>
<td>Neck usually means the lower narrow portion (neck) of the uterus (root: cervic/o); cervix uteri (SER-viks) (U-ter-ı)</td>
</tr>
<tr>
<td>clitoris</td>
<td>A small erectile body anterior to the urethral opening that is similar in origin to the penis (roots: clitor/o, clitorid/o)</td>
</tr>
<tr>
<td>contraception</td>
<td>The prevention of pregnancy</td>
</tr>
<tr>
<td>corpus luteum</td>
<td>The small yellow structure that develops from the ovarian follicle after ovulation and secretes progesterone and estrogen</td>
</tr>
<tr>
<td>cul-de-sac</td>
<td>A blind pouch, such as the recess between the rectum and the uterus; the rectouterine pouch (kul-di-SAK or pouch of Douglas (see Fig. 15-1))</td>
</tr>
<tr>
<td>endometrium</td>
<td>The inner lining of the uterus</td>
</tr>
<tr>
<td>estrogen</td>
<td>A group of hormones that produce female characteristics and prepare the uterus for the fertilized egg. The most active of these is estradiol</td>
</tr>
<tr>
<td>fallopian tube</td>
<td>See oviduct</td>
</tr>
<tr>
<td>fimbriae</td>
<td>The long fingerlike extensions of the oviduct that wave to capture the released ovum (FIM-bre-e-e (see Fig. 15-1); singular: fimbria)</td>
</tr>
<tr>
<td>follicle-stimulating hormone</td>
<td>A hormone secreted by the anterior pituitary that acts on the gonads. In the female, it stimulates ripening of ova in the ovary</td>
</tr>
<tr>
<td>fornix</td>
<td>An archlike space, such as the space between the uppermost wall of the vagina and the cervix (see Fig. 15-1); from Latin meaning &quot;arch&quot;</td>
</tr>
</tbody>
</table>

#### Disorders

- **cystocele**: Herniation of the urinary bladder into the wall of the vagina (Fig. 15-11)
- **uterine contractions**: The muscular contractions of the uterus that occur during labor
- **fetal heart rate**: The rate at which the fetal heart beats
- **fetal heart tone**: The sound of the fetal heart tones
- **gestational age**: The age of the fetus as determined by the number of weeks since the last menstrual period
- **gestation**: The period during which a foetus develops in the uterus
- **cervical insufficiency**: The condition in which the cervix fails to close properly during pregnancy

### Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>AB</td>
<td>Abortion</td>
</tr>
<tr>
<td>AFP</td>
<td>Alpha-fetoprotein</td>
</tr>
<tr>
<td>AGA</td>
<td>Appropriate for gestational age</td>
</tr>
<tr>
<td>AI</td>
<td>Artificial insemination</td>
</tr>
<tr>
<td>ART</td>
<td>Assisted reproductive technology</td>
</tr>
<tr>
<td>C-section</td>
<td>Cesarean section</td>
</tr>
<tr>
<td>CFD</td>
<td>Cephalopelvic disproportion</td>
</tr>
<tr>
<td>CVS</td>
<td>Chorionic villus sampling</td>
</tr>
<tr>
<td>DAE</td>
<td>Dilatation and evacuation</td>
</tr>
<tr>
<td>ECMO</td>
<td>Extracorporeal membrane oxygenation</td>
</tr>
<tr>
<td>EDC</td>
<td>Estimated date of confinement</td>
</tr>
<tr>
<td>FHR</td>
<td>Fetal heart rate</td>
</tr>
<tr>
<td>FHT</td>
<td>Fetal heart tone</td>
</tr>
<tr>
<td>FTND</td>
<td>Full-term normal delivery</td>
</tr>
<tr>
<td>FTP</td>
<td>Full-term pregnancy</td>
</tr>
<tr>
<td>GA</td>
<td>Gestational age</td>
</tr>
<tr>
<td>GIFT</td>
<td>Gamete intrafallopian transfer</td>
</tr>
<tr>
<td>hCG</td>
<td>Human chorionic gonadotropin</td>
</tr>
<tr>
<td>HDN</td>
<td>Hemolytic disease of the newborn</td>
</tr>
<tr>
<td>IVF</td>
<td>In vitro fertilization</td>
</tr>
<tr>
<td>LMP</td>
<td>Last menstrual period</td>
</tr>
<tr>
<td>NB</td>
<td>Newborn</td>
</tr>
<tr>
<td>NICU</td>
<td>Neonatal intensive care unit</td>
</tr>
<tr>
<td>OB</td>
<td>Obstetrics</td>
</tr>
<tr>
<td>PDA</td>
<td>Patent ductus arteriosus</td>
</tr>
<tr>
<td>PIH</td>
<td>Pregnancy-induced hypertension</td>
</tr>
<tr>
<td>PKU</td>
<td>Phenylketonuria</td>
</tr>
<tr>
<td>SVT</td>
<td>Spontaneous vaginal delivery</td>
</tr>
<tr>
<td>UC</td>
<td>Uterine contractions</td>
</tr>
<tr>
<td>UTP</td>
<td>Uterine term pregnancy</td>
</tr>
<tr>
<td>VBAC</td>
<td>Vaginal birth after cesarean section</td>
</tr>
<tr>
<td>ZIFT</td>
<td>Zygote intrafallopian transfer</td>
</tr>
</tbody>
</table>
Chapter Review Exercises

Chapter Review Exercises are designed to test your knowledge of the chapter material and appear at the end of each chapter.

Labeling Exercise

The Digestive System: Write the name of each numbered part on the corresponding line of the answer sheet.

1. Auricle
2. Liver
3. Esophagus
4. Pancreas
5. Stomach
6. Duodenum
7. Small intestine
8. Rectum
9. Sublingual gland
10. Submandibular gland
11. Submaxillary gland
12. Parotid gland
13. Main pancreatic duct
14. Common hepatic duct
15. Common bile duct
16. Gallbladder
17. Cystic duct
18. Blood vessels

Accessory Organs of Digestion: Write the name of each numbered part on the corresponding line of the answer sheet.

1. Common bile duct
2. Cystic duct
3. Common hepatic duct
4. Pancreatic duct
5. Pancreas
6. Gallbladder
7. Smaller bile duct
8. Common bile duct
9. Pancreatic duct
10. Duodenum

Terminology

Matching: Match the following terms and write the appropriate letter to the left of each number:

1. Cholelithiasis
2. Appendicitis
3. Gallstones
4. Ascendancy
5. Descendancy
6. Esophagus
7. Incisors
8. Lingual
9. Papilla
10. Pancreas
11. Liver
12. Bile duct
13. Choledochal
14. Cholecystitis
15. Choledocholithotripsy

- a. Hypoglossal nerve
- b. Hypothalamus
- c. Hypothalamus
- d. Hypothalamus
- e. Hypothalamus
- f. Hypothalamus
- g. Hypothalamus
- h. Hypothalamus
- i. Hypothalamus
- j. Hypothalamus

- a. A type of liver disease
- b. Pertaining to the common bile duct
- c. Crushing of a bile duct
- d. Inflammation of a bile duct
- e. White patches on a mucous membrane
Case Studies and Case Study Questions

Case Studies and Case Study Questions in every chapter present terminology in the context of a medical report. These are an excellent review tool as they test your cumulative knowledge of medical terminology, and put terminology into a real-world context.

Case Studies 18-1: Medical Records

An electrical fire in the physicians’ dictation room left a charred mass of burned and water-damaged medical records. Discharge sheets had been stacked awaiting physicals sign-off before they could be restored to Medical Records for a change several medical transcriptionists spent a day sorting through the remains to reassemble the charts, all of which were from the patients of the large otolaryngology practice. In addition to present fragmentation of information, the transcriptionists matched word cues to create piles of similar documents. Patients with middle and inner ear problems were identified with words such as tympanosclerosis, synostosis, synovial cheek, cholesteatoma, otosclerosis, labyrinth, middle ear, and acoustic neuroma. Patients treated for external ear conditions were grouped using terms such as otoplasty, myringoplasty, and osteoma. Medical, hospital, and nasal surgery patients were grouped separately. Restoring the charts was an impossible task, and the records were determined to be either incomplete or a total loss. The only document to survive the fire was an audiogram report.

Case Studies 18-2: Audiology

W.S., a 68-year-old woman, was scheduled for surgery in the ambulatory surgery center an hour before her scheduled procedure. Before transfer to the operating room, she spoke with her ophthalmologist and reviewed the surgical plan. Her right eye was identified as the operative eye and it was marked with a “yes” and the surgeon’s initials on the lid. She was given sterile drops in the right eye and an intravenous bolus of 2.0 mg of midazolam (Versed).

In the OR, W.S. and her operative eye were again identified by the surgeon, anesthesiologist, and nurses. After anesthesia and evertation were achieved, the eye area was prepped and draped in sterile sheets. An operating microscope with video system was positioned over her left eye. A 5-0 silk sutures were placed through the superior rectus muscle to retract the eye. A lid speculum was placed to open the eye. A minimal conjunctival peritomy was performed, and hemostasis was achieved with wet-field cautery. The anterior chamber was entered at the 10:30 clock position. A Capstoneotomy was performed after iridectomy was placed in the anterior chamber. Phacoemulsification was carried out without difficulty. The remaining cortex was removed by irrigation and aspiration. An in-the-bag IOL (IOL) was placed into the posterior chamber. Muscle was injected to achieve pupillary dilation, and the wound was closed with one 10-0 suture. Subconjunctival Quincke and Garamycin were injected. The lid speculum and tarsorrhaphy sutures were removed. After application of Exsine and Bacitracin ointments, the eye was patched and a shield was applied. W.S. left the OR in good condition and was discharged to home 4 hours later.

Case Studies 18-3:

S.R., a 55-year-old man, reported decreased hearing sensitivity in his left ear for the past 3 years. In addition to patient identification information, the transcriptionists spent 3 days sorting through the remains to reassemble the charts, all of which were from the patients of the large otolaryngology practice. In addition to present fragmentation of information, the transcriptionists matched word cues to create piles of similar documents. Patients with middle and inner ear problems were identified with words such as tympanosclerosis, synostosis, synovial cheek, cholesteatoma, otosclerosis, labyrinth, middle ear, and acoustic neuroma. Patients treated for external ear conditions were grouped using terms such as otoplasty, myringoplasty, and osteoma. Medical, hospital, and nasal surgery patients were grouped separately. Restoring the charts was an impossible task, and the records were determined to be either incomplete or a total loss. The only document to survive the fire was an audiogram report.

Write terms from the case studies with the following meanings:

4. Marked surgery incisions are made posteriorly which is
   a. anterolateral to the ear drum
   b. posterior to the ear
   c. anterior to the ear drum
   d. inferior to the tympanic membrane
   e. ipsilateral
   
5. The study of hearing is termed:
   a. acoustology
   b. radiofrequency
   c. audiometry
   d. otology
   e. endoscopy
   
6. Sensorineural hearing loss may result from:
   a. damage to the second cranial nerve
   b. blepharoptosis
   c. cerebellopontine angle tumor
   d. damage to the eighth cranial nerve
   e. stapedectomy
   
7. Ultrasound destruction and aspiration of the lens is called:
   a. cataractomy
   b. phacoemulsification
   c. lodectomy
   d. vitrectomy
   e. iridotomy
   
8. The term akinesia means:
   a. movement
   b. lack of sensation
   c. weakness
   d. lack of movement
   e. inactivity
   
9. The term that means “on the same side” is
   a. unilaterally
   b. bilateral
   c. uniaxial
   d. unimodal
   e. ipsilateral
   
10. Another name for an acoustic neuroma is:
   a. acoustic degeneration
   b. acoustic somnolence
   c. auditory steatosis
   d. RON cochlear labrinthitis
   e. acoustic glaucoma
   
11. record obtained by tympanometry
   
12. pertaining to or perceived by the ear
   
13. inflammations of the middle ear
   
14. inflammations of the external ear
   
15. physician who specializes in conditions of the eye
   
16. within the eye
   
17. abnormal contraction of the pupil
   
18. generic drug name for Vertez
   
19. Hz
   
20. BAEP
   
21. OD
   
22. IOL

Abbreviations. Define the following abbreviations:

1. EENT
2. OR
3. EENT/dental
4. ENT
5. OD
6. IOL
7. EENT
8. T/P
9. T/P
10. T/P
11. T/P
12. T/P
13. T/P
14. T/P
15. T/P
16. T/P
17. T/P
18. T/P
19. T/P
20. T/P
21. T/P
22. T/P

Case Study Questions

Multiple choice. Select the best answer and write the letter of your choice to the left of each number:

1. The medical specialty of otorhinolaryngology is more often referred to as:
   a. ENT or ear, nose, and throat
   b. otolaryngology
   c. ENT
   d. oral surgery
   e. ENT/dental

   The surgery to remove one of the microscopically blind spots of the retina is:
   a. stapedectomy
   b. retinal detachment
   c. myringoplasty
   d. tympanoplasty
   e. retinal detachment

   Procedure in question 2 may require injection of a new antinflammatory product called:
   a. antibiotic
   b. transferase
   c. lipase
   d. analgesic
   e. antihistamine
Flashcard Starter Set

More than 100 flashcards are included at the back of the text. Add to this collection with your own cards as you work through the text (please be sure to see the Student Resources section for information on creating your own set of flashcards using the Flashcard Generator).

Student Resources and the PASSport to Success®

Different people learn in different ways. Some students learn by reading. Others take in new information by listening to their instructors. You may prefer to write down notes. A simple self-assessment can tell you whether you are a visual, auditory, or kinesthetic learner. When you understand the way that you process information most effectively, you can choose resources that fit your learning style. The PASSport to Success® is a practical system that lets you learn faster, remember more, and achieve success.

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Your journey begins with your textbook, Medical Terminology: An Illustrated Guide, 6th Edition. The textbook is filled with icons that guide you to resources and activities that are designed for your personal learning style.

Inside the front cover of your textbook, you will find your personal access code. Use it to log on to the Point—the companion website for this textbook. On the website, you can search and sort learning activities by learning style and choose the ones that will help you understand the material quickly and efficiently.

Go to the pronunciation glossary on the Student Resources to hear these words pronounced.
Discover your learning style!

If you like to study animations, illustrations, and diagrams, you may be a visual learner. If you like to sound out new words or discuss material with other students, you may be an auditory (hearing) learner. If you take a lot of notes during class and benefit from hands-on learning activities, you are probably a kinesthetic (touch) learner.

Most people have both a primary and a secondary learning style—and the PASSport to Success® helps you identify both! Once you know how you learn best, you can choose learning activities that will help you master new material more efficiently.

Discovering your learning style is easy—and fun! Here’s how to begin:

1. Use your web browser to navigate to http://lww.mypowerlearning.com/login.isf.
2. If this is the first time you are visiting the MyPowerLearning website, enter your scratch-off access code from the inside cover of this book into the “Access Code” box and click “Begin!”
3. MyPowerLearning will send you an email with your username and password you will use to log in to MyPowerLearning and complete your Learning Style Assessment (Don’t worry—There are no wrong answers!).
4. Print and read your own personal learning styles report to better understand how to study most effectively and efficiently.

Once you know your own personal learning style, access thePoint.lww.com/CohenMedterm6e on thePoint—the companion website for Medical Terminology: An Illustrated Guide, 6th Edition, which will allow you to search and sort PASSport to Success® activities by learning style to choose the most effective way for you to learn the material. Resources and activities available to students include the following:

- Multiple choice, true–false, and fill-in-the blank questions
- Categories
- Listen & Label and Look and Label
- Word Building
- Zooming In
- Pronounce It
- Spell It
- Sound It
- Hangman
- Crossword Puzzles
- Quiz Show
- Concentration
- Case Studies and Case Study Questions
- Dictionary and Audio Glossary application
- Flashcards and Flashcard Generator applications
- Animations
- Audio Drills (which allow for chapter audio files to be downloaded as MP3 files)
- Chapter Quizzes
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