

MEDICAL TERMINOLOGY BLOOPERS AND JOKES

Transcription Bloopers

The correct term is in parentheses.

1. “Bilingual” (inguinal) hernias.
2. Marital “discharge” (discord).
3. Bilateral “Cadillacs” (cataracts).
4. “Sick as hell” (sickle-cell) anemia.
5. Medication “regime” (regimen).
6. “April” (atrial) fibrillation.
7. There are no other palpable “nerds” (nodes).
8. BuSpar 10 mg, two po bid, #80, no “refunds” (refills).
9. Patient had a “Pabst beer” (Pap smear) today.
10. This was a case of “old timers” disease (Alzheimer’s disease).
11. Pelvic ultrasound revealed “firebirds in the Eucharist” (fibroids in the uterus).
12. There was a recent outbreak of chicken “pops” (pox).
13. The colonoscope was passed into the “assending” (ascending) colon.
14. The term visceral means internal “orgasm” (organs).
15. The patient finally had a hysterectomy and “Singapore-roofectomy” (salpingo-oophorectomy).

Patient Malaprops

1. A doctor reported that during an interview with a patient—a middle aged woman—she reported that she had had her “ovary’s sister” (ovarian cyst) removed.
2. A man walked into an ER complaining that he had taken “all six of those explositories” (suppositories) and still wasn’t getting any relief.

3. While giving her history, a new patient related that there was a time when she thought she had "hog's skin disease" (Hodgkin's disease), but thankfully was proven wrong.
4. A patient presented at rounds with a complaint of "leakage from the micro-valve" (mitral valve). The doctor thought of recommending a plumber.
5. A patient reported being unable to "decaffeinate" (defecate).
6. Recently a patient appeared in a New York City ER complaining of "toxic sock syndrome" (toxic shock syndrome).
7. A patient informed her doctor that she had diverticulosis and had increased the amount of "fabric" (fiber) in her diet.
8. A man was admitted to the CCU complaining of chest pain. The family history was positive for heart disease, but the physician wasn't sure since the patient reported that his mother had "digestive" (congestive) heart failure.
9. One patient wasn't sure he believed his neurologist when he told him performing a "lumber puncture" (lumbar) wouldn't hurt.
10. One little boy volunteered that he knew his brother had his "independence" (appendix) cut out last year.
11. A patient always refers to her condition as "room of toys" (rheumatoid) arthritis.

Unusual Definitions for Medical Terms

(Humorous definitions of medical terms circulate freely throughout the medical community. This is just a sample of what can be found.)

Aorta	A statement of something you should do.
Artery	The study of fine paintings.
Bacteria	The back door of a cafeteria.
Barium	What you do when CPR fails.
Benign	What you are after you are eight.
Bowel	A letter like A, E, I, O, or U.
Bunion	Paul's surname.
Carpal	Someone with whom you drive to work.
Cat scan	Searching for kitty.
Cauterize	Made eye contact with her.
Cesarean section	A district in Rome.
Chiropractor	An Egyptian doctor.
Colic	A sheep dog.
Coma	A punctuation mark.
Congenital	Friendly.
Constipation	Endangered feces.
D & C	Where Washington is located.

Dilate	To live long.
Ear	Where you are now.
Elixir	What a dog gives to his owner when she gives him a bone.
Enema	Not a friend; as in "a guy like that is his own worst enema."
Fester	Quicker.
Fibrillate	To tell a small lie.
Genital	Non-Jew.
G.I. series	Military ball game.
Hangnail	Coat hook.
Hemorrhoid	Transportation given to a third person; as, "He didn't have his car so I offered hemorrhoid."
Hernia	Referring to a female's knee.
Humerus	Tell us what we want to hear.
Impotent	Distinguished, well-known.
Inbred	The best way to eat peanut butter.
Inguinal	A new type of Italian noodle.
Intubate	What a fisherman is.
Kidney	Part of a child's leg.
Labor pain	Injured at work.
Medical staff	A doctor's cane.
Migraine	What a Russian farmer now says about his harvest.
Minor operation	Coal digging.
Morbid	A higher offer.
Nitrates	Cheaper than day rates.
Node	Was aware of.
Organic	Church musician.
Outpatient	A person who has fainted.
Ova	Finished; done with.
Pap smear	Fatherhood test; or to slander your father.
Pelvis	Cousin to Elvis.
Penis	Someone who plays the piano.
Protein	In favor of young people.
Post-operative	A letter carrier.
Recovery room	A place to do upholstery.
Rectum	Dang near killed 'em.
Sacrum	Holy.
Secretion	Hiding anything.
Seizure	Roman emperor.
Serology	A study of English knighthood.

Serum	What you do when you barbecue steaks.
Sperm	To reject.
Tablet	A small table.
Terminal illness	Getting sick at the airport.
Tumor	An extra pair.
Urine	Opposite of you're out.
Urticaria	Insisting to be manually transported; as "The only reason that child is screaming at his mother is that he wants urticaria."
Varicose	Nearby.
Vein	Conceited.
Vitamin	What you do when friends stop by for a visit.

THE COLONOSCOPY JOURNAL

Colonoscopy Journal:

I called my friend Andy Sable, a gastroenterologist, to make an appointment for a colonoscopy.

A few days later, in his office, Andy showed me a color diagram of the colon, a lengthy organ that appears to go all over the place, at one point passing briefly through Minneapolis.

Then Andy explained the colonoscopy procedure to me in a thorough, reassuring and patient manner.

I nodded thoughtfully, but I didn't really hear anything he said, because my brain was shrieking, 'HE'S GOING TO STICK A TUBE 17,000 FEET UP YOUR BEHIND!'

I left Andy's office with some written instructions, and a prescription for a product called 'MoviPrep,' which comes in a box large enough to hold a microwave oven. I will discuss MoviPrep in detail later; for now suffice it to say that we must never allow it to fall into the hands of America's enemies.

I spent the next several days productively sitting around being nervous.

Then, on the day before my colonoscopy, I began my preparation. In accordance with my instructions, I didn't eat any solid food that day; all I had was chicken broth, which is basically water, only with less flavor.

Then, in the evening, I took the MoviPrep. You mix two packets of powder together in a one-liter plastic jug, then you fill it with lukewarm water. (For those unfamiliar with the metric system, a liter is about 32 gallons). Then you have to drink the whole jug. This takes about an hour, because MoviPrep tastes - and here I am being kind - like a mixture of goat spit and urinal cleanser, with just a hint of lemon.

The instructions for MoviPrep, clearly written by somebody with a great sense of humor, state that after you drink it, 'a loose, watery bowel movement may result.'

This is kind of like saying that after you jump off your roof, you may experience contact with the ground.

MoviPrep is a nuclear laxative. I don't want to be too graphic, here, but, have you ever seen a space-shuttle launch? This is pretty much the MoviPrep experience, with you as the shuttle. There are times when you wish the commode had a seat belt. You spend several hours pretty much confined to the bathroom, spurting violently. You eliminate everything. And then, when you figure you must be totally empty, you have to drink another liter of MoviPrep, at which point, as far as I can tell, your bowels travel into the future and start eliminating food that you have not even eaten yet.

After an action-packed evening, I finally got to sleep.

The next morning my wife drove me to the clinic. I was very nervous. Not only was I worried about the procedure, but I had been experiencing occasional return bouts of MoviPrep spurtage. I was thinking, 'What if I spurt on Andy?' How do you apologize to a friend for something like that? Flowers would not be enough.

At the clinic I had to sign many forms acknowledging that I understood and totally agreed with whatever the heck the forms said. Then they led me to a room full of other colonoscopy people, where I went inside a little curtained space and took off my clothes and put on one of those hospital garments designed by sadist perverts, the kind that, when you put it on, makes you feel even more naked than when you are actually naked.

Then a nurse named Eddie put a little needle in a vein in my left hand. Ordinarily I would have fainted, but Eddie was very good, and I was already lying down. Eddie also told me that some people put vodka in their MoviPrep.

At first I was ticked off that I hadn't thought of this, but then I pondered what would happen if you got yourself too tipsy to make it to the bathroom, so you were staggering around in full Fire Hose Mode. You would have no choice but to burn your house.

When everything was ready, Eddie wheeled me into the procedure room, where Andy was waiting with a nurse and an anesthesiologist. I did not see the 17,000-foot tube, but I knew Andy had it hidden around there somewhere. I was seriously nervous at this point.

Andy had me roll over on my left side, and the anesthesiologist began hooking something up to the needle in my hand.

There was music playing in the room, and I realized that the song was 'Dancing Queen' by ABBA. I remarked to Andy that, of all the songs that could be playing during this particular procedure, 'Dancing Queen' had to be the least appropriate.

'You want me to turn it up?' said Andy, from somewhere behind me.

'Ha ha,' I said. And then it was time, the moment I had been dreading for more than a decade. If you are squeamish, prepare yourself, because I am going to tell you, in explicit detail, exactly what it was like.

I have no idea. Really. I slept through it. One moment, ABBA was yelling 'Dancing Queen, feel the beat of the tambourine,' and the next moment, I was back in the other room, waking up in a very mellow mood.

Andy was looking down at me and asking me how I felt. I felt excellent. I felt even more excellent when Andy told me that It was all over, and that my colon had passed with flying colors. I have never been prouder of an internal organ.

On the subject of Colonoscopies...

Colonoscopies are no joke, but these comments during the exam were quite humorous... A physician claimed that the following are actual comments made by his patients (predominately male) while he was performing their colonoscopies:

1. 'Take it easy, Doc. You're boldly going where no man has gone before!'
2. 'Find Amelia Earhart yet?'
3. 'Can you hear me NOW?'
4. 'Are we there yet? Are we there yet? Are we there yet?'
5. 'You know, in Arkansas , we're now legally married.'
6. 'Any sign of the trapped miners, Chief?'
7. 'You put your left hand in, you take your left hand out...'
8. 'Hey! Now I know how a Muppet feels!'
9. 'If your hand doesn't fit, you must quit!'
10. 'Hey Doc, let me know if you find my dignity.'
11. 'You used to be an executive at Enron, didn't you?'
12. 'God, now I know why I am not gay.'

And the best one of all:

13. 'Could you write a note for my wife saying that my head is not up there?'

DICTATION GUIDELINES FOR PHYSICIANS

By Kelly Ratzlaff

Adherence to these guidelines will assure the highest quality transcribed reports in the shortest amount of time.

At the beginning of the dictation, take as deep a breath as you possibly can. Now, try to dictate the entire report before you have to inhale again.

When dictating a particularly difficult word or phrase, please turn your head and speak directly into your armpit.

We charge per character, including periods. An effective way to cut your cost is to dictate your entire report as one sentence.

It is not necessary to repeat the same sentence multiple times in the same dictation.

If you have to sneeze or cough suddenly, please remove your head from your armpit and sneeze or cough directly into the microphone.

If you must eat while you dictate, please stay away from foods such as marshmallows, bananas, and pudding. Apples, pretzels, and celery are much better choices.

Please don't stop dictating when you yawn. It throws off our rhythm.

If the patient's name is Alan Ratzlaffenhasenphepherzinsky, please have the courtesy to spell "Alan" – there are several possible spellings, you know. For the last name, simply state "the usual spelling".

It is not necessary to repeat the same sentence multiple times in the same dictation.

Please note – the phrase "well-developed, well-nourished white female" is only three syllables.

Cardiologists, it is not necessary to dictate at the rate of your patient's atrial fibrillation.

Do not stop dictating in the event of minor background noise such as an office party, the janitor's vacuum cleaner, a screaming infant, etc. Again, it throws off our rhythm.

Be sure to place the emPHAsis on the CORrect syLLABLE, especially if enGLISH is your SECond lanGUAGE.

It is not necessary to repeat the same sentence multiple times in the same dictation.

Talk as fast you possibly can. Fair's fair; after all, we type as fast as we possibly can.

Please speak as quietly as you can.....we want to be able to hear what's going on around you.

If you need to pause for 5 or 10 minutes between words or phrases, pounding the receiver on the desk or repeatedly saying, "still dictating.... still dictating..... still dictating.... still dictating..... still dictating....." reminds us that indeed, you are still dictating.

Just because you need to use the restroom is no reason to stop dictating. Time is money! (thanks to Monica for this one!)

Don't dictate so loudly that you disrupt your fellow physicians' football game in the doctors' lounge. In fact, you really should whisper *all* of your dictation, since the information is confidential.

Similarly, if you are going to watch TV while dictating at home, please watch a war movie with lots of bombing, and be sure to have the volume high enough so everybody in your living room can hear above your talking. (Thanks, Shirley!)

If you need to correct yourself -- sorry, correct an error, please do not rewind the tape -- sorry, do not back up and record over the error -- sorry, wait, the mistake - - just continue with the sentence -- wait -- go back -- with the paragraph and fix the error -- er, the mistake.

Please go back and just delete that last guideline.

When dictating on your cell phone from your car, be sure to go through as many tunnels as possible. This will ensure confidentiality of the information. (thanks to Tom for this one!)

You (y-o-u) do not need (n-e-e-d) to spell (s-p-e-l-l) obvious words (w-o-r-d-s) for us (u-s). It is our job (j-o-b) to know (k-n-o-w) how to (t-o) spell words that (t-h-a-t) we learned (l-e-a-r-n-e-d) in third (t-h-i-r-d) grade (g-r-a-d-e).

One last thing, it is not necessary to repeat the same sentence multiple times in the same dictation.

A CODE OF ETHICAL BEHAVIOR FOR PATIENTS

- Do not expect your doctor to share your discomfort. Involvement with the patient's suffering might cause him to lose valuable scientific objectivity.
- Be cheerful at all times. Your doctor leads a busy and trying life and requires all the gentleness and reassurance he can get.
- Try to suffer from the disease for which you are being treated. Remember that your doctor has a professional reputation to uphold.
- Do not complain if the treatment fails to bring relief. You must believe that your doctor has achieved a deep insight into the true nature of your illness, which transcends any mere permanent disability you may have experienced.
- Never ask your doctor to explain what he is doing or why he is doing it. It is presumptuous to assume that such profound matters could be easily explained in terms that you would understand.
- Submit to novel experimental treatment readily. Though the surgery may not benefit you directly, the resulting research paper will surely be of widespread interest.
- Pay your medical bills promptly and willingly. You should consider it a privilege to contribute, however modestly, to the well-being of physicians and other humanitarians.
- Do not suffer from ailments that you cannot afford. It is sheer arrogance to contract illnesses that are beyond your means.
- Never reveal any of the shortcomings that have come to light in the course of treatment by your doctor. The patient-doctor relationship is a privileged one, and you have a sacred duty to protect him from exposure.
- Never die while in your doctor's presence or under his direct care. This will only cause him needless inconvenience and embarrassment.