

MANIPAL UNIVERSITY

SIXTH SEMESTER B.Sc. H.I.A. DEGREE EXAMINATION – DECEMBER 2009

SUBJECT: APPLIED MEDICAL TRANSCRIPTION

Thursday, December 10, 2009

Time: 10:00-13:00 Hrs

Max. Marks: 80

☞ **All questions are compulsory.**

1. Write Short notes on the following:

- 1A. Flagging
- 1B. History and Physical Examination report.
- 1C. Compensation
- 1D. Productivity
- 1E. Proofreading

(5×5 = 25 marks)

2. Answer the following questions.

- 2A. Define Medical Transcription. What makes developed countries like USA to look at India as an ideal ground for outsourcing?
- 2B. What is voice recognition technology? Will speech recognition technology affect the future of Medical Transcription?
- 2C. Why are reference materials and books indispensable resources for the Medical Transcriptionist? Write in detail about any five reference books used by the MTs.

(10×3 = 30 marks)

3. Choose the best answers for the following:

- 3A. 'Every day' is abbreviated as
 - A) q.d.
 - B) u.d.
 - C) n.r.
 - D) o.d.
- 3B. This is preferred when two main clauses are neither closely related nor joined by a conjunction
 - A) Semicolon
 - B) Period
 - C) Comma
 - D) Hyphen
- 3C. The introduction of this gave sound quality a much needed boost.
 - A) Mylar tape
 - B) Standard cassette
 - C) Compact disc
 - D) Computers
- 3D. Nouns, verbs, adjectives and adverbs are called _____ words.
 - A) Function
 - B) Conveying
 - C) Effective
 - D) Content
- 3E. This book is the MT's primary reference, providing definition of terms listed alphabetically.
 - A) Medical Style Guide
 - B) Medical Word book
 - C) Medical Dictionary
 - D) Abbreviation and Acronym book
- 3F. Up-to-date, well-used references are the signs of
 - A) Well-informed MT
 - B) Professional MT
 - C) Both
 - D) Qualified MT
- 3G. The dictators have different accents because
 - A) They are from different origins
 - B) They are specialized in different specialities
 - C) Both
 - D) English is their second language

3H. Proofreading and editing should be done in such a way that

- A) The text is edited
- B) Contents are unchanged
- C) Both
- D) It should be changed according to the transcriptionist

3I. The correct method of transcribing the following sentence is

- A) SYSTEMS REVIEW: Unremarkable
- B) Systems Review: unremarkable
- C) Systems Review: Unremarkable
- D) SYSTEMS REVIEW: UNREMARKABLE

3J. Choose the correct sentence

- A) Do not get up till the report is finished
- B) Share your headphone whenever necessary
- C) Findout what your neighbor is doing
- D) Squeeze your shoulders, stretch your back & shake your arms frequently.

3K. The act of translating patient health record from oral to written format is called

- A) Transcription
- B) Medical Transcription
- C) Medical Documentation
- D) Both B) & C)

3L. Reasons for flagging a report are

- A) Inability to understand a certain portion or term
- B) Mixing up of genders
- C) Medication not consistent with the diagnosis
- D) All the above

3M. Be _____, and you can face the future with confidence

- A) Secretive B) Loyal
- C) Informed D) Planned

3N. Identification data contains information on

- i) Name of the patient
 - ii) Medical record number
 - iii) Date of operation
- A) i) and ii) B) ii) and iii)
 - C) Only iii) D) All the above

3O. Which of these statements are correct about inserting major headings in the transcribed report?

- i) Obvious headings may be inserted, even if not dictated
 - ii) There should be no space between major headings
 - iii) Use uppercase letters for all headings
 - iv) Use short forms or abbreviations whenever possible
- A) i) and ii) B) ii) and iii)
 - C) i) and iii) D) Only iv)

(1×15 = 15 marks)

4. Proofreading

The following has been taken from a discharge summary. You should find at least 10 errors.

ADMISSION DIAGNOSIS:

1. Congestive heart failure.

SECONDARY DIAGNOSIS:

- 1. Restrictive lung disease secondary to obesity.
- 2. Morbid obesity.
- 3. History of SVT.
- 4. Hypertension
- 5. Asthma
- 6. Obstructive sleep apnea.

REASON FOR HOSPITALIZATION:

The patient is a 46-year-old African-American woman with severe obesity, greater than 400 lbs, admitted to the emergency room with shortness of breathe for three days. The patient had stopped taking her Lasix two days prior to admission secondary to the fact that she had difficult walking to the bathroom to urinate. The patient also noticed some increasing lower extremity swelling and orthopnea. The patient denied any chest pain or palpitations. The chest x-ray done in the emergency room was consistent with CHS. The patient was hemodynamically stable but had a low O₂ saturation of 87 pct in the emergency room and was admitted to the hospital.

HOSPITAL COURSE

1. Congestive heart failure. The patient was ruled out for a myocardial infarction by enzymes, and the patient was diuresed with IV Lasix while in the hospital. She diuresed over 8 liters, with improvement in her lungs and decrease in her lower extremity swelling. The day prior to discharge, she was re-started on p.o. Lasix and maintained a good urine output, with 40 mg Lasix b.i.d. The patient's chest x-ray also showed improved pulmonary edema. On discharge, the patient will be maintained on 80 mg p.o. Lasix, one time in the morning.
2. Restrictive lung disease. The patient had several restrictive lung disease secondary to her morbid obesity. Her lung exam did improve after diuresis. The patient is also known to retain CO₂. Her admit ABG showed a pH of 7.52, CO₂ of 93, an O₂ of 66. After diuresis, on 1 liter, her ABG improved to a pH of 7.45, CO₂ of 57, and O₂ of 526. When the patient would ambulate, her oxygen sats on room air would be up to 93%. However, at sleep, her O₂ saturations would drop. An ABG was drawn on room air when the patient was at rest, and her O₂ continued to be low at 34. It is suggested that the patient will need home oxygen, between 1 to 2 liters, to maintain her oxygen saturation between 87% and 90%.

(10 marks)

