AND HEALTH PROFESSIONALS

An English for Specific Purposes Course Book

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<u>Unit 1</u>

A. The Hospital Team

It is essential for you to know the people who you are going to work with in the hospital. You must know the different roles played by these people as well. They could be doctors, nurses, medical professionals, and staff. Let's get to know them and what they do.



porter	receptionist	paramedic	scrub nurse	pharmacist
radiologist	lab technician	charge nurse	cardiologist	midwife
pediatrician	consultant	physiotherapist	anesthetist	surgeon

Exercise 1.1 Choose the correct word from the box to complete the sentences.

- 1. A ______ is a doctor who treats children
- 2. A _______ is a medical professional who attends births and delivers babies.
- 3. A ______ is a doctor who specializes in illnesses of the heart and blood vessels.
- 4. A _______ is a staff who moves patients, equipment, furniture, etc. around the hospital.
- 5. A ______ is a medical professional who takes x-rays and other images.
- 6. A ______ is a nurse who supports surgeons in the operating room.
- 7. A ______ is a nurse who prepares medicines to give to medical staff or patients.
- 8. A ______ is a medical professional who responds to emergencies and gives first aid.
- 9. A ______ is a doctor who performs surgical operations.
- 10. A ______ is a medical professional who examines samples and tissues under a microscope.
- 11. A ______ is a nurse who supervises staff nurses in a ward.
- 12. A ______ is a staff who assists people with appointments and directions.
- 13. A ______ is a nurse who administers drugs to patients to prevent pain during surgery.
- 14. A ______ is a doctor who gives expert opinion to other doctors and surgeons.
- 15. A ______ is a medical professional who helps patients with physical difficulties resulting from illness, injury, disability.

Introducing Yourself and the Hospital Staff

When it's your first day at work or if you are moved from one department or ward to another, you must make sure that you can introduce yourself properly to your new colleagues. In turn, you should be able to introduce yourself and your colleagues to the patient. Here are sample conversations:

Introducing yourself to the patient

- Parn: Hello! I'm Parn, a Staff Nurse here at Naresuan University Hospital. May I know your name?
- Moo: Hi! My name is Moo. How are you?
- Parn: I'm good, thanks for asking. I'd like you to meet Jam, she is our nursing assistant.
- Moo: Nice to meet you Jam.
- Jam: Nice to meet you too. If you need anything, just let me know.
- Parn: Thanks Jam. Could you please get some water for Moo.
- Jam: Sure, I'll be back in a minute.

Introducing your colleagues

- Parn: Hi Bam. Have you met the Ward Charge Nurse?
- Bam: No, we haven't met yet.
- Parn: May I introduce you to Sister Tam.
- Bam: Good morning, my name is Bam. How do you do?
- Tam: I'm doing well. How about you?
- Bam: I'm great! It's a pleasure to meet you.
- Tam: The pleasure is mine.

When you are to meet people for the first time, you have to use formal or informal words to address them. Typically, if you are meeting someone new from work, especially if they are someone older or more senior than you, you have to use formal words. If you are meeting new friends or colleagues at the same level as you are then you can use informal words.

	Introduction	Response
Informal	Hello / Hi!	Hello / Hi!
	I'm May I know your name?	l'm
	I'd like you to meet	
	How are you?	I'm fine, thanks. And you?
		I'm good, thanks for asking.
	Nice to meet you.	Nice to meet you too.
	I'm glad to meet you	I'm glad to meet you too.
Formal	May I introduce you to ?	Good morning. My name is
	How do you do?	I'm doing well. How about you?
	Have you met ?	No, we haven't met yet.
		Yes, we have met yesterday / last week.
	It's a pleasure to meet you.	I'm very pleased to meet you too.
		The pleasure is mine.

Speaking Activity

Form a group of three and practice the introductions and responses. Prepare to present your introductions in front of the class.

Different countries, Nationalities and Languages

It is important for nurses to know the different countries, nationalities and languages of their patients.

Country	Nationality	Language(s)	Country	Nationality	Language(s)
Australia			Myanmar		
Cambodia			Philippines		
China			Singapore		
France			Spain		
Germany			Switzerland		
Italy			Thailand		
Japan			The United States		
Korea			Vietnam		
Malaysia			Malaysia		

Exercise 1.2 Write the nationality and language spoken of the people from these countries.

B. In and Around the Hospital

The names of the wards can be formed by adding a suffix from the departments and used as an adjective.

e.g.	surgery	becomes	the <u>surgical</u> ward	*for obstetrics we use the labor ward
	medicine	becomes	the <u>medical</u> ward	
	gynecology	becomes	the gynecolog ical ward	

Exercise 1.3 Make an adjective from these words by removing the letters in **bold** and adding a suffix.

1. Neurology	5. Opthalmolog y	
2. Cardiology	6. Neonat e	
3. Gastrology	7. Pharmacolog y	
4. Dermatolog y	8. Urolog y	

Ask your partner the following questions:

- 1. Where can a mother go to visit her premature baby?
- 2. Where do you ring to order a patient's medications?
- 3. Where can I find a doctor to look at my moles?
- 4. Where do patients usually go if they have a heart attack?
- 5. Where do patients go when they have an infection in their bladder?

Look at the prepositions used in the following examples:

- A pediatric nurse works in the nursery in the children's ward.
- My friend works **in** the Operating Theatre **on** the 6th floor.
- The Surgical Ward is **next to** the Orthopedic Ward **on** the same floor.

We use different expressions depending on the situation:

We **go to** <u>a ward</u> or <u>department</u>.

We work in <u>a ward</u>, but we work at <u>the hospital</u>.

We take/send a patient to a department but he is in the ward, hospital, or theatre.

C. Hospital Admissions

What is the Standard Admission Procedure where you work? With a partner, put the following points into a possible sequence. (1-9)

- _____a. Tell the patient what is going to happen to him/her in the next 12-24 hours.
- _____ b. Co-ordinate between the patient, the doctors and other health care workers.
- ____ c. Put on the patient's name band and signs necessary on the bed (e.g. nil orally or fasting)
- _____ d. Inform the doctor in charge of the patient's arrival.
- _____e. Welcome the patient in a calm, friendly manner.
- _____f. Introduce yourself and the other patient (s) in the room. Introduce other staff and the Ward Charge Nurse where possible.
- ____ g. Complete the admission form and appropriate charts.
- _____ h. Show the patient where to find the bathroom, the Nurse's station, the Day Room (Sitting Room).
- _____ i. Demonstrate the handset with the overhead light and the call bell (or buzzer) and the patient how to use the remote if a TV is provided.

Reading

On Monday, Mark is admitted to hospital and arrives in the Surgical Ward with Julie. They meet the Charge Sister and Sister Joanna, who takes them to a room. Mary, the Ward Help, is in the room cleaning the bedside tables. There are 2 beds in the room but both are empty.

Sister Pat:	This is your room, Mark – number 612. You will be on your own for a couple of days so you can choose the bed near the window or this one near the bathroom. Hello Mary, this is Mark Andrews and his wife Julie.
Mary:	Good morning, Mr. and Mrs. Andrews. Can I get you a bottle of water and a glass?
Sister Pat:	Thank you Mary, but mark is having more tests today and can't have anything to eat or drink until later. Mary is a wonderful help and will help us to look after you, Mark.
Mark:	Thank you. I'd like to have the bed near the window if that's all right.
Sister Pat:	Yes, of course. I'll leave you to change into your pyjamas and hop into bed and then I'll come back in a few minutes to ask you a few questions. You can put your clothes in the cupboard on the left, but it isn't very big so it's probably a good idea to take the suitcase home with you, Mrs. Andrews. Mark, you can put the things you need in the cupboard near the bed.
Mark:	Yes, thank you. Jules will take the case with her when she goes – you've got the car, love, so that's no problem, is it? Can my wife stay here this morning, Sister?
Sister Pat:	Yes, that's fine. I'll come back to speak to you both very soon. This is the handset. if you need anything, just call. This button is the buzzer and this one is to cancel your call – the light over the door turns off – this one is for the overhead light OK?

Exercise 1.4 Read the dialogue to answer the following questions:

- 1. Who is Mary?
- 2. How many patients are in the room with Mark?
- 3. Does he have a choice of beds? Which one does he choose?
- 4. What is Julie taking home?
- 5. Is Mark fasting?

Speaking Activity

In groups of 3, practice the dialogue. Discuss the expressions in bold and how you can say them differently.

<u>Unit 2</u>

A. Accidents and Emergencies

As health care professionals, we have to know the terms used to get information in a patient's record.

a triage nurse	treatment	an initial assessment	cubicle
life-threatening	a priority	waiting room	registration

- 1. Take a seat in the ______.
- 2. The first nurse you meet will be a specialist called ______.
- 3. This nurse will make ______ of your problem.
- 4. This helps decide who is______.
- 5. A patient with a ______ condition will see a doctor immediately.
- 6. A nurse will get personal details from you and fill in a hospital ______ form.
- 7. When there is a free _____, a doctor will see you.
- 8. The doctor will decide on the _____

Patient Record

Surname	Grady	First name	Jim	
DOB	2.3.50	Gender	M	F
Occupation		retired	-	
Marital status		widowed		
Next of kin		son		
Contact no.		07765432178		
Smoking intake	2	n/a		
Alcohol intake		30 units per v	veek	
Reason for admission		chest pains		
Medical history		high blood pressure		
Allergies		none		
GP		Dr. Parkinson		
		Central Surge	ry	

Exercise 2.2 Find words and abbreviations in the patient record with these meanings.

 _ 1. job
 2. bad reactions, e.g. certain medications
 _ 3. family doctor
 _ 4. closest relative
 _ 5. the amount of something you eat, drink, etc. regularly
 _ 6. date of birth
 _ 7. male / female
 8. pass illnesses and injuries
 9. married / single /divorced /widowed
 _ 10. not applicable (not a question for this patient)
 _ 11. in each (day, week, etc.)
 _12. number

Giving Instructions

We need to be able to give instructions clearly to our patients or to other health care professionals to be able to provide the best possible care.

To tell somebody what to do, you can use the *Imperative*. Start the sentence with a verb without a subject.

Check for signs of circulation **Apply** the pads to his chest

To tell what not to do, add Don't before the imperative

Don't remove burnt clothing

To emphasize that is important, you can use Make sure ...

Make sure the wound is clean. Make sure you don't touch his body.

When asking for instructions, you can use the Present Simple, have to, shall and should.

What **do I do** now? Do I **have to** immobilize his leg? **Shall I** take off the dressing now? What dosage **should I** give him?

Exercise 2.3 Match the beginnings and endings of the sentence.

1. Check that	a. I count up to between breaths?
2. Make sure you	b. I give her?
3. What do	c. have to apply the pads?
4. Don't let	d. the patient is breathing.
5. Should I	e. the patient try to stand up
6. Shall I bandage	f. put the burnt area under running water?
7. Don't	g. the patient's pulse
8. What dosage shall	h. tie the bandage too tight!
9. Take	i. the wound now?
10. Where do I	j. use a sterile needle

Speaking Activity

Student A

1. You are a parent. Five minutes ago a poisonous snake bit your child. You phone an emergency helpline. Explain the situation to the helpline nurse, then listen and use these notes to find out what to do. Note down the instructions that you are given.

Example: What shall I do with?

Should I put it on ice? Should I?

- wound ice? bandage?
- child thirsty milk OK?
- walk around?
- doctor?

2. A man you work with has spilt pesticide on his face, eyes and mouth. Phone the emergency helpline for instructions. Explain the situation to the helpline nurse, then listen and use these notes to find out what to do. Note down the instructions that you are given.

- difficulty breathing walk around?
- drink?
- mouth? eyes? skin?
- •

Student B

1. You are a nurse working on a telephone helpline. Listen to your caller explain the emergency, then use these notes to tell the caller what to do to answer any questions.

Example: Wash the wound with soap and water. Don't practice ...

- wound wash √ (soap and water), ice X, bandage √ (not too tight)
- immobilize the leg \checkmark (lower than the heart)
- stand up, move X
- food, drink X
- hospital √

2. You are a nurse working on a telephone helpline. Listen to you caller explain the emergency, then use these notes to tell the caller what to do and to answer any questions.

Example: Make sure he gets fresh air!

- Open windows and doors and ...
- fresh air $\sqrt[4]{}$ (windows /doors $\sqrt[4]{}$, carry if necessary $\sqrt[4]{}$, walk X)
- mouth wash out ✓ (water)
- milk √ (alcohol X)
- skin remove clothes if covered in pesticide √, wash √ (running water, soap)
- eyes wash \checkmark (running water, 15 minutes +, chemicals x)
- touch pesticides XX (gloves $\sqrt{\sqrt{}}$)

B. Admissions by Referral

Polite Phrases

When talking to patients and staff, it is important to use polite words and tone. We have to remember that we are the people who patients face every day and should be courteous and kind as possible. Even though some patients can be difficult, we should still compose ourselves and treat them nicely as we would like to be treated the same.

Nurse:	<u>l've forgotten</u> ¹ your name.
Patient:	It's Mrs. Stein.
Nurse:	Of course, Mrs. Stein. <u>Give me</u> ² your letter of referral.
Patient:	Here it is.
Nurse:	Thanks. So, Mrs. Stein, you've come in for removal of varicose veins?
Patient:	Yes. The operation is this afternoon.
Nurse:	<u>Confirm</u> ³ one or two things. First, <u>are you on</u> ⁴ any medications?
Patient:	Yes, I take Venlafaxine.
Nurse:	What for ⁵ ?
Patient:	I take it for depression.
Nurse:	OK. Now, <u>tell me</u> ⁶ about your lifestyle. <u>Report</u> ⁷ any alcohol or drug problems you have.
Patient:	None, I don't drink and I don't take drugs.
Nurse:	Also, <u>tell me if you have</u> ⁸ any contact with HIV in the past six months.
Patient:	I haven't had any contact with HIV, no.
Nurse:	Fine, and <u>who's</u> ⁹ paying for your treatment?
Patient:	I'm covered by medical insurance.
Nurse:	Great, and lastly, <u>you must</u> ¹⁰ take off your make up and rings.

Exercise 2.4 Replace each underlined phrase in the dialogue with an alternative polite phrase from the list.

- _____ would you mind if I ask you to
- _____ it's important to know about
- ____ can you tell me how you are
- _____ could you tell me if you take
- _____ I'm sorry, I can't remember
- _____ I need to know if you have
- _____ can you let me have
- _____ I'd like to check
- ____ may I ask why
- _____I have to ask

Getting Verbal Consent

A 64-year-old woman with MS is admitted. The doctor thinks she should be placed on a feeding tube. In the morning the patient is confused. A nurse talks to her about the feeding tube and she consents. However, later in the day when the tube is going to be placed, the patient says she doesn't want it in. The following morning, the patient is vague and the nurse tries once more and again the patient consents to the procedure.

Is the patient able to decide? Should the nurse place the feeding tube or not? Work in pairs. Discuss these questions

1. When is it necessary to get a patient's verbal 'informed consent'?

2. When should a patient sign a consent form and when is it not necessary?

3. Listening to a heartbeat through a stethoscope is a medical procedure – does this need the patient's informed consent.

C. Outpatients

In some countries, outpatients don't make appointments; they just turn up. Discuss if a 'first come, first served' system has any advantages at all compared to an 'appointments only' system.

Exercise 2.5 Use this words in the box to identify the kinds of appointments described in sentences 1-12.

cancelled	initial	previous	confirmed
missed	routine	delayed	out-of-hours
double-booked	postponed	vacant	follow-up

1. An outpatient's appointment after an operation
2. When two people are given the same appointment time
3. When a patient tells you they will definitely keep their appointment
4. An appointment for eight o'clock in the evening
5. When the consultant is running late
6. The first appointment
7. An appointment made for Monday, but changed to Wednesday
8. When a patient doesn't turn up
9. An appointment slot that is available
10. A regular appointment
11. Not this appointment, but the one before
12. All the appointments after this one.

Group Activity

Deciding who should have an appointment

Work in groups of 4. You work in a hospital x-ray department. The next four weeks are almost fully booked, but there is one vacant slot today. Four patients want the vacancy and you must decide who gets it. Read the information that will be given to you and talk about it with your group.

Patient 1

On the telephone is a woman. She wants to make an appointment for her 12-year-old child. Mother and daughter have missed the last two appointments; the first because they decided to go to the cinema instead, the second because they forgot.

Patient 2

In reception is a patient who is a heavy smoker. She has a bad cough, but has not stopped smoking despite doctor's warnings. An x-ray was taken last month, but the hospital has lost her records.

Patient 3

In reception is a patient who is worried about a slight intermittent pain in his chest. He already has an appointment, but it is in four weeks' time and he wants an earlier one. He has already been waiting for two hours.

Patient 4

On the telephone is a young man who is not ill, but needs a chest x-ray in order to start a new job. He says his new employers cannot wait and he must have the x-ray done now or lose the job.

<u>Unit 3</u>

A. Signs and Symptoms

As a healthcare worker, it is vital to be able to determine signs and symptoms of the patients illness or disease.

Signs are what you can observe, see or feel for yourself.

The nurse can observe changes in recorded **observations** – blood pressure, temperature, pulse or respiration.

- a bruise or bruising that is hematoma
- a **rash**, which is an area of red lumps or pimples on the skin, which can be a type of **erythema** or **urticaria** (allergy rash)
- changes in the color of the skin: **anemic –looking** white or pale

cyanosis – blue color

jaundice – yellow color

inflammation - redness

- signs of weight loss (losing weight) or weight gain (putting on weight)
- swelling or puffiness extra fluid in the tissues under the skin (edema)
- cuts, wounds or lacerations: breaks in the skin

Symptoms are things that the patient feels and tells the nurse about.

The patient may say that:

- he feels like vomiting or he feels sick in the stomach (nauseated)
- he has **pain**
- he cannot sleep (suffers from insomnia)
- he had **diarrhea** frequent, loose stools/bowel actions
- he feels **dizzy** or **giddy** (vertigo)
- he is very **thirsty** or dehydrated
- he feels **numbness** or **tingling** ('pins and needles') loss of sensation or changed sensation

Signs or Symptoms

Palpations are a ______ when the patient tells you he can feel his heart racing or thumping. It could also show as a ______ on an ECG.

Shortness of Breath may be visible or only felt by the patient 'on exertion' (SOB-OE)

Exercise 3.1 Work with a partner and decide if the following words are signs or symptoms.

1. an irregular pulse	 6. shallow respirations	
2. stomach ache	 7. dyspnea	
3. thirst	 8. pallor	
4. hunger	 9. lacerations	
5. extreme weight loss	 10. headache	

Question forms

When we want to get information from the patient or from our colleagues, we have to be able to make good questions. Here are ways on how you can ask questions:

1. We change the order to form a question with <u>be</u>, with <u>tenses that are formed with be and have</u>, and with <u>modal verbs</u> such as *can*, *will*, *should*, *etc*. Switch the subject and the verb.

Are you all right? (NOT: You are all right?)

What is she doing?

Where have they put the wheelchair?

Can you move your toes?

2. We use the verb *do* to make questions with the Present Simple and Past Simple

What side effects **does** this drug **have**?

Did you take your medication last night?

Do you smoke or drink alcohol?

3. If what, who, etc. asks about the subject of the verb, do is <u>not</u> necessary

What happened? (NOT: What did happen?)

Who said that? (NOT: Who did say that?)

4. We often use question tags to check information, to express surprise, to be friendly etc.

This is your first time on this ward, **isn't it**?

You **don't** eat meat, **do you**?

5. We sometimes leave out the verb, if it is easily understood.

Any pain? = Do you have any pain?

Comfortable? = Are you comfortable?

Exercise 3.2 Match the beginnings of the questions with the endings.

1. OK,	a. it hurt?
2. What	b. Mrs. Hales?
3. Where does	c. are you?
4. What about	d. broken?
5. Let's have a look – swollen	e. happened to you?
6. You've had an x-ray	f. haven't you?
7. Anything	g. your shoulder?
8. You aren't on any other medication,	h. isn't it?
· · ·	

Write questions to go with these answers.

Nurse:
Patient: Not bad, thanks – a bit sore.
Nurse:
Patient: I fell off my bike.
Nurse:
Patient: Here, around my wrist.
Nurse:
Patient: Yes, I can, slowly.
Nurse:
Patient: Yes, very! I've also got a cut on my leg – look.
Nurse:
Patient: Yes, it is deep. Will I need stitches?
Nurse:
Patient: No, never – and I don't want any!
Nurse:
Patient: No. I haven't seen him yet.

B. Monitoring the Patient

Taking 'OBs' (Patient Observations)

Write down the full n	neaning of these abbrevia	ations.		
BP	т	P	R	
What measurements	are considered within no	ormal limits for an a	dult's BP, T, P, R?	
BP	т	P	R	
	vords in order to make se your / under / just / this		al signs is the nurse ta	-
2. roll / your / cai				
3. cold / a / feel / bit / your / may / on / chest. / this				
4. and / out / in /	just / normally / breathe	2		
5. relax / me / for	r / your / arm.			
6. shirt / you und	o / please? / your/ for m	e, / could		

Describing Readings

Exercise 3.4 Complete the sentences with the words below, and match each one to a graph.

	's up	rising	fell	stable
	up and down	went up	varies	back to
	1. His temperature was	all nig	ht, but now it's a	at 37.5.
	2. Her heart rate	at 20 bpm, b	out now it's	again.
	3. His blood pressure	from 12	0/80 to 160/100.	
	4. Her pulse rate was extre	emely low, but now it _	to 7	70.
	5. His respiratory rate	betweer	n 10 and 25 bpm.	
	6. He was running a fever,	but his temperature's	nor	mal now.
a.	b		c.	
d	e		f.	

The Passive Form

- Passive verb forms are very common in medical English. We use Passive verbs to say what is done to people and things.
 - The patient's progress **is monitored** every hour. Mr. West **was treated** for multiple injuries
- Often, you can choose whether to use an Active form or a Passive form. Compare these sentences: Paramedics treated the man for hypothermia. (______) The man was treated for hypothermia. (______)
- The Passive form focuses on the action, not on the person or thing that does the action. If you want to say who does the action use *by*.
 - The man was treated for hypothermia by paramedics.

Exercise 3.5 Underline the correct form of the verbs in italics.

Mrs. Ramone *admitted /was admitted*¹ to hospital for an operation. She *didn't give / wasn't given*² food for eight hours. She *brought / was brought*³ to theatre at sixteen hundred hours.

She was prepared / prepared ⁴ for theatre. The nurse was shaved / shaved ⁵ the area which was going to *cut* / *be cut* ⁶, and Mrs. Ramone *put on* / was *put on* ⁷ a theatre gown. Her dentures *removed* / were removed ⁸, and her wedding ring taped to her wrist.

Exercise 3.6

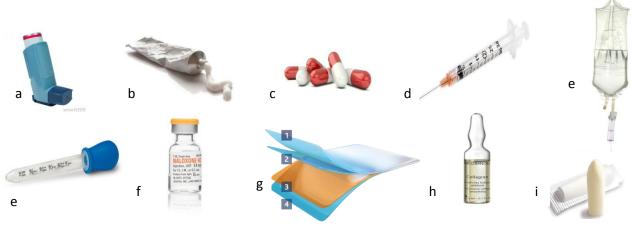
Kim Deva was woken up one night by severe abdominal pains. Read the notes, and write sentences to describe his experience using the Passive. You can say who did each action if you want to.

example: admit / hospital = He was admitted to hospital.

1. give / general anesthetic	
2. perform / appendectomy	
3. insert / stitches / wound	
4. prescribe / painkillers	
5. discharge from hospital	

C. Medication

Types and Forms of Medication



Exercise 3.7 Match the pictures with the forms of medications:

1. syringe	 6. suppository	
2. inhaler	 7. adhesive patch	
3. ointment	 8. vial	
4. capsules	 9. dropper	
5. IV drip	 10. ampoule	

Exercise 3.8 Complete each sentence with a type of medication.

a painkiller	a sedative	an anti-inflammatory	an inoculation
an antibiotic	an antihistamine	a stimulant	an antidepressant
a laxative	a supplement		

1	_ kills bacteria and other germs.
2	_ protects you against infectious diseases.
3	_ relieves pain.
4	_ reduces swelling.
5	_ encourages bowel movement.
6	_ provides a substance that the body lacks.
7	_ treats allergies
8	_ increases activity in the body.
9	reduces feelings of extreme sadness.
10	_ makes you relaxed and sleepy.

Medication dosage can be measured differently:

for liquids: teaspoon (tsp), tablespoon (tbsp.), millilitres (mL), litres (L)	1 L = m	L 1 tbsp = tsp.
for solids: milligrams (mg), grams (g), micrograms (mcg)	1 g = m	g 1 mg = mcg

Speaking Activity.

Work in pairs. You are going to exchange details about patients' medications.

Student A

Ask Student B questions to complete this information about patient's medication.

Patient's name	dosage	medication	frequency
Mrs. Dupont	½ teaspoon		3 / day at mealtimes
Mrs. Francis		painkiller	
Miss Wang	500 mg		1 / day x 2 days
Miss Ekobu		antihistamines	
Mr. Strauss			1 / day on an empty stomach
Mr. Rossi	75 mg capsule	Tamiflu	
Mr. Metcalf		laxative	
Mr. Takahashi	injection 30mg		1 / hours

Student B

Ask Student A questions to complete this information about patient's medication.

Patient's name	dosage	medication	frequency
Mrs. Dupont		antibiotic	
Mrs. Francis	infusion		4 mg / minute
Miss Wang		iron supplement	
Miss Ekobu	2 capsules		one / 4 hours (with water)
Mr. Strauss	1 capsule	vitamin supplement	
Mr. Rossi			2 / day x 5 days
Mr. Metcalf	1 teaspoon		when needed
Mr. Takahashi		painkiller	

<u>Unit 4</u>

A. Mental Health Nursing

Exercise 4.1 Match each word with its definition.

а.	posture	1. not sure where you are
ч.	postare	

- b. unemotional ____2. not wanting to talk to people
- c. hallucinations _____3. not logical, not making sense
- d. maniac _____4. behaving on an abnormally excited way
- e. paranoia ____5. not showing your feelings
- f. disoriented ____6. a way of standing or sitting
- g. uncommunicative _____7. feelings of extreme uncontrollable sadness
- h. delusions _____8. strange and false ideas that somebody believes are true
- i. irrational _____9. occasions when you imagine you see things that are not really there
- j. depression _____ 10. the false belief that somebody is trying to harm you, or that they are somebody very important

Present Perfect v Past Simple

We use the Present Perfect

- to talk about past actions in an unfinished period of time, for example 'in my whole life' or 'today'
 I've never done this before.
 - Have you seen Ana this morning?
- when past actions has a result in the present
 He's had his medication and is feeling sleepy.
- when we give news of recent, finished events
 - The psychiatrist **has** just **spoken** to the patient's family
- when we say how much we have completed, how many times we have done something, etc. I have told him six times to take his medication.
- with yet, to talk to about whether or not tasks have been completed.
 I've taken Mr. Pool's temperature, but I haven't checked his blood pressure yet.
- with for and since to talk about when a present situation started
 - I've worked at this hospital for six months.

We use the Past Simple, not the Present Perfect

- when we talk about a finished time in the past, especially with time expressions such as ago, last week, in 2016.
 - I graduated from college two years ago.

I finished my hospital training in 2016.

The patient **went** to the hospital last week.

Exercise 4.2 Complete each sentence using one of the verbs below. Use the Present Perfect where possible. In other sentences, use the Past Simple.

	attend	go	see	study	be	finish	
	have	start	write	finish	reply		
1. We the assessment. You'll get the report tomorrow.							
2. T	he doctor		_ the patient th	ree times today.			
3. I working here a year ago.							
4. Mrs. Linton is no longer in hospital. She home.							
5. I three letters to the consultant, but he yet.						yet.	
6. I until 11 o'clock last night.							
7. The patient the clinic since January.							
8. T	8. The patient in hospital for a week now.						
9 you ever a general anesthetic?							

Exercise 4.3 Paula is a nursing assistant. She is finishing her shift and Jack is starting his. Jack is checking the list of things to do. Look at the list and write five sentences about what Paula has done and hasn't done yet.

X	change patients' dressings	
	Mrs. Eríksson - blood pressure	
	Mr. Síssoko - temperature	
X	clean up spillage	
X	Mrs. Wong - urine specimen	
	Þ	
Write th	ne past participle of these verbs:	
be	give	watch
work	forget	talk
take	try	

Speaking Activity

Write questions using *Have you ever* and the verbs above to find out about your partner's experience as a student nurse.

Example: Have you ever been late for duty?

Work in pairs and ask your questions. Each time you receive the answer yes to your question, ask another question using Past Simple to get more information.

A: Have you ever been late for duty?

B: Yes, I have.

A: Really how many times. / When was that?

B: Just once. / It was yesterday.

Reading

Schizophrenia – the facts

Every year, 1.5 million people worldwide are diagnosed with schizophrenia. It is a mental illness which has periods called 'psychotic episodes'. During a psychotic episode, a sufferer shows disturbing changes in behavior. They may seem very cold and unemotional, using few facial expressions, and say strange things in a slow, flat voice. They may lose all interest in life and spend days doing nothing at all, not even washing or eating. These distressing symptoms are shocking for family members who, of course, remember what the sufferer was like before the onset of the illness.

During a psychotic episode, there may be hallucinations. Hearing voices that other people do not hear is the most common type of hallucination. The voices give orders and carry on conversations. Sometimes the voices swear and make threats.

Someone with schizophrenia may have delusions, believing for example that they are a famous, historically important person, or that people on television send them special messages.

People with schizophrenia may not think logically. They are isolated because conversation with them is very difficult, so they have no one to communicate with.

It is relatively common for schizophrenia sufferers to commit suicide – 10 per cent of people with schizophrenia (especially younger adult males) kill themselves. Violence and threats against others, on the other hand, are not symptoms of the illness.

There is medication that can reduce the symptoms, but it often has bad side effects, and some sufferers discontinue treatment because of this. Although many sufferers can continue to lead a relatively normal life, it has been estimated that no more than one in five individuals recovers completely, and most will require long-term treatment.

We do not yet know the cause of schizophrenia. Researchers have looked at links with genes, with brain development, with infections before birth, and with traumatic life events.

Exercise 4.4 Read the article about schizophrenia and decide if these sentences are true of false.

_____1. There are 1.5 million sufferers of schizophrenia.

_____2. A psychotic episode is a symptom of schizophrenia.

- _____3. People with schizophrenia are usually not violent and dangerous.
- _____4. Suicide is not connected with schizophrenia.
- _____5. We understand what causes schizophrenia.

Join the word combinations without looking at the text. Choose some of the combinations to learn.

life

1. changes	a. relatively normal
2. facial	b. completely
3. the onset of	c. side effects
4. think	d. suicide
5. commit	e. expressions
6. reduce the	f. treatment
7. have bad	g. the illness
8. lead a	h. in behavior
9. recover	i. logically
10. long-term	j. symptoms

B. Neurology

Exercise 4.5 Read about the Glasgow coma scale and complete the text with the adjectives and adverbs below. The order of responses has been mixed, read each section and number the responses in correct order. (eye response 1-4, verbal response 1-5, motor response 1-6)

appropriately	bent	coherently	deeply
incomprehensible	random	spontaneously	verbal

The **Glasgow coma scale** is used for measuring how ______¹ unconscious a patient is, in order to assess the extent of brain damage. Eye response, verbal response, and motor response are tested. For each of these tests, he patient receives a score, with the minimum being 1 for no response. The total for the three tests gives the patient's GCS score.

Eye response

____a. eyes opening to ______² command

- ____b. no eye opening
- ____c. eyes opening in response to pain
- ____d. eyes opening ______
- Verbal response

____a. confused (the patient responds to questions but there is ______⁴, some confusion)

____b. none

____c. inappropriate words (______⁵ speech, but no conversational exchange)

____d. _____⁶ sounds (moaning, but no words)

____e. oriented (the patient responds _____⁷ to simple questions)

- Motor response
- ____a. withdrawal (pulls arm away) from pain
- ____b. extension (arms straight by sides) in response to pain
- ____c. no motor response
- ____d. obeys commands (the patient does simple things as asked)
- ____e. localizing pain (moves hands towards pain)
- ____f. flexion (arms ______ 8 up to chin) to pain

Case study – a head injury

Exercise 4.6 You are going to read the case study of a young female patient who received brain injuries four months ago. Tick which injuries Katie sustained.

1. a fractured skull	4. a broken leg	
2. a broken arm	5. internal injuries	
3. chest injuries		

Katie Martin is a nine-year-old female who was in a car crash. At the scene here Glasgow coma scale was 3. She was intubated and transported by helicopter to hospital. She was taken to the intensive care unit due to her intracranial hemorrhage which 24 hours later resulted in evacuation. She was placed on a ventilator and a tracheostomy was performed. Katie's pre-operative diagnosis was left frontal hemorrhagic contusion and multiple skull fracture. She had a left frontal craniotomy with evacuation of the intracerebral hematoma. The dural tear and skull fracture were repaired. Additionally she suffered lacerations to the liver, face, left eyelid, and a right femur fracture.

Group Activity

Form groups of 4 people. Read the lyrics of the song "Unwell" and identify mental health conditions that are mentioned.

All day staring at the ceiling Making friends with shadows on my wall All night hearing voices telling me That I should get some sleep Because tomorrow might be good for something Hold on Feeling like I'm headed for a breakdown And I don't know why But I'm not crazy, I'm just a little unwell I know right now you can't tell But stay awhile and maybe then you'll see A different side of me I'm not crazy, I'm just a little impaired I know right now you don't care But soon enough you're gonna think of me And how I used to be, me I'm talking to myself in public Dodging glances on the train And I know, I know they've all been talking about me I can hear them whisper And it makes me think there must be something wrong with me Out of all the hours thinking Somehow I've lost my mind I've been talking in my sleep Pretty soon they'll come to get me Yeah, they're taking me away

<u>Unit 5</u>

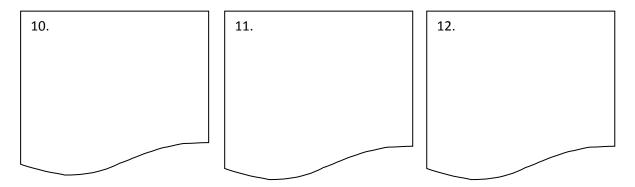
A. Nutrition and Obesity

As healthcare workers, we must know the right kind of food for the patient's diet. We should be able to know the differences between the different types of diets and food for our health teaching.

Main Course A (choose one) two grilled burgers tuna fish pie a cheese pizza lentil soup egg noodles two slices of roast beef two fried eggs tofu curry a lamb kebab	+B (choose two) fried rice boiled potatoes salad baked beans in tomato sauce tinned tomatoes stir-fried mushrooms fried onion rings steamed broccoli	Dessertchocolate puddinga bananayoghurta doughnutDrinka bottle of colaa glass of orange juicea glass of winea glass of milk			
Exercise 5.1 Look at the list and a	answer the questions.				
1. Find two good sources of prot					
2. Find two good sources of carb					
-					
3. Find two dairy products					
4. Find seven ways of cooking fo	od				
5. Which foods on the list are hig	sh on fat?				
6. Which foods contain high leve	ls of vitamin C?				
7. Which foods are low in vitami	ns?				
8. Which items on the list are jur	nk foods?				
9. Which food do you think is highest in calories?					

With your partner, use the list to create:

- 10. The most nutritious meal possible
- 11. the meal for a diabetic
- 12. the meal for somebody who needs to lose weight



Exercise 5.2 Complete the descriptions of vitamins, minerals and oils with the words below. Some words are used more than once.

teeth	organs	enzymes	nervous system	cells
brain	eyes	skin	immune system	
blood	muscles	bones	cardiovascular system	

 Vitamin C is needed to help the ______1 repair itself when it is cut or damaged. It is found in fruit, especially citrus fruit like oranges and grapefruit.

 The B-vitamins keeps the ______2 healthy and help reduce stress. They are found in foods like wholegrain bread and cereals.

 Vitamin A keeps the ______3 healthy and is important for good vision. It is found in fatty foods like butter, cheese, whole milk and yoghurt.

 Vitamin D is needed for healthy bones and ______4 because it helps the body absorb calcium.

 Our body makes Vitamin D when our ______5 is exposed to sunlight.

 Calcium is needed for children's ______6 and teeth to grow. It is found in foods like milk, cheese and yoghurt.

 Iron helps your ______7 carry oxygen. If you do not get enough iron, you will be pale and tired and you may get anemia. Iron is found in red meats, especially liver.

 Zinc makes your _______^8 stronger so that you can fight colds and infections. It is found in shellfish, nuts and seeds.

 Omega-3 is an essential fatty acid which helps your ________9 function well. It is found in oily

fish like mackerel, sardines, salmon and tuna.
Protein builds up, maintains and replaces the tissues in your body. Your ______¹⁰, your

_____¹¹, and your immune system are made up mostly of protein. Carbohydrates are sugars which are broken down by _____¹² then stored in the

¹³ as a source of energy. Grain products such as rice, bread and pasta are sources of carbohydrate.

Fats fuel the body and help absorb some vitamins. They are also the building blocks of hormones, and they insulate nervous system tissue in the body. Unsaturated fats, found in oils and nuts, for example, are believed to protect the ______1⁴.

Should / Shouldn't

• We use should/ shouldn't to give advice and to say what would be correct

You **should give up** smoking.

Your blood sugar **shouldn't go** over 240 mg/dL

• Should is weaker than must. That means the person you are giving an advice to doesn't have to follow them.

I **should stop** eating sweets – but I'm not going to!

• Here are some other ways of giving advice

It would be a good idea to lose some weight.

I'd see a nutritionist if I were you.

Exercise 5.3 Complete the sentences using should or shouldn't + verb.

- 1. You ______ some water before you go running.
- 2. I'm getting fat. I _____ more exercise.
- 3. You ______ breakfast it wakes up the body and provides fuel for the day.
- 4. People with high blood pressure ______ too much salt on their food.
- 5. You ______ plenty of vitamin C in your diet.
- 6. People with diabetes ______ large meals.
- 7. A person with an eating disorder help from psychologist.

8. Children ______ too many sweets.

Giving an Advice

A close friend has written you an email asking for advice. She is worried about her eating habits. Exercise 5.4 Complete the email with the words below.

	addicted to	bad for you	cut down	cut out	skip meals
	feel depressed	fills my stomach	get cravings	losing weight	
	<u>o</u>	New M	Message		
	То:				
	Bcc: Subject:				
and that	at's terrible because I sh	ould be only 65 kilos! I'm	really shocked.	Every time I look	c in a mirror I
	¹ , but that ju	ust makes me ear more.	I am so busy the	se days, and I de	on't have any time for
exercis	se. Of course, I know fas		•	•	
	-	urger. I suppose I must b			u
	⁵ in the sam	v 11			3
l am tr	ying hard to lose a kilo a	5	(³ . but it doesn't v	vork. I just feel hunary
	en I give in and have spa				
	fast foods, I promise – b	.		•	⁷ on
•	•	2			
chocol	ate and even				
should	know about	⁹ and diet, a	and you could giv	ve me some advi	ice.
Love,					
Hesta					
					12

Discuss with a partner what advice to give Hesta to help her lose weight successfully and in a healthy way. Think about these topics then write an email replying to Hesta.

•	170
exercise	what not to eat
how much weight to lose	when to eat
how quickly to lose weight	what to drink
what to eat	other good habits

Speaking Activity

Think of a problem and tell your partner about it. Ask his/her advice. Give each other pieces of advice and perform it in class.

e.g.





I have a doctor's appointment tomorrow but we have an exam. What do you think should I do?

I think you should cancel or change the appointment.

В

B. Hygiene

To avoid infecting ourselves and the patients, we should always practice proper hygiene.

Exercise 5.5 Match each of these items of hygiene equipment to a picture.

Exercise 5.5 Match each of these ite	ins of hygiene equipment								
bin a	b	c d	e						
bucket									
cloth									
mop									
sink									
clinical waste disposal bag	3								
detergent									
	IOHAZARD	Persi							
paper towels	g	h i a	j j						
soap dispenser									
Exercise 5.6 Complete the sentences	with the words in the bo	х.							
contamination antimic	crobial agent	pathogens swa	ab						
disinfectant suscep	tible	resistant spo	otless						
			1. An will kill microorganisms.						
L	ll microorganisms.								
L		back of the throat.							
	o get a sample from the b								
2. Use a sterilet	o get a sample from the b such as	viruses and bacteria.	ion.						
 Use a sterilet Our bodies have ways to kill 	o get a sample from the b such as l are most	viruses and bacteria.	ion.						
 Use a sterile to Our bodies have ways to kill The old, the young, and the very il 	o get a sample from the b such as l are most to most antibiotics.	viruses and bacteria.	ion.						
 Use a sterile to Our bodies have ways to kill The old, the young, and the very il Staphylococcus is 	o get a sample from the b such as l are most to most antibiotics. from urine and blood.	viruses and bacteria.	ion.						
 Use a sterile to Our bodies have ways to kill The old, the young, and the very il Staphylococcus is There is a risk of 	o get a sample from the b such as l are most to most antibiotics. from urine and blood. n	viruses and bacteria. to hospital infect	ion.						
 Use a sterile to Our bodies have ways to kill The old, the young, and the very il Staphylococcus is There is a risk of Wash floors and door handles with A home doesn't have to be 	o get a sample from the b such as l are most to most antibiotics. from urine and blood. n , but it doe	viruses and bacteria. to hospital infecti s have to be clean.	ion.						
 Use a sterile to Our bodies have ways to kill The old, the young, and the very il Staphylococcus is There is a risk of Wash floors and door handles with 	o get a sample from the b such as l are most to most antibiotics. from urine and blood. n , but it doe	viruses and bacteria. to hospital infecti s have to be clean.	ion. c. an antibiotic						
 Use a sterile terms of the sterile terms of the start of the start	b get a sample from the b such as l are most to most antibiotics. from urine and blood. n , but it doe hygiene by doing this quit	viruses and bacteria. to hospital infecti s have to be clean. z.							
 2. Use a sterile te 3. Our bodies have ways to kill 4. The old, the young, and the very il 5. Staphylococcus is 6. There is a risk of 7. Wash floors and door handles with 8. A home doesn't have to be Exercise 5.7 Test your knowledge of 1. What is MRSA? 	b get a sample from the b such as a l are most to most antibiotics. from urine and blood. , from urine and blood. , but it doe hygiene by doing this quit a. a virus	viruses and bacteria. to hospital infect s have to be clean. z. b. a bacterium	c. an antibiotic						
 Use a sterile terms of the start of	b get a sample from the b 	viruses and bacteria. to hospital infect s have to be clean. z. b. a bacterium b. poor hospital hygiene	c. an antibiotic c. drinking bad water c. common cold						

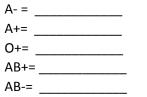
6. How long should you wash youra. fifteen secondsb. half a minutec. one minutehands in hot water to be sure they are clean?

<u>Unit 6</u> A. Blood

Blood Groups

Can you work out the names of the women? Maddy's blood can't be given to other women. Holly could receive blood from Katie and Alex. Only Katie could donate blood to Freya.

Four of the women could give blood to Maddy. Alex can't be given blood by any of the others.



RED BLOOD CELL COMPATIBILITY TABLE

	Donor							
ecipient	0-	0+	Α-	A+	B-	B+	AB-	AB+
0-	\checkmark	×	×	×	×	×	×	×
0+	\checkmark	\checkmark	×	×	×	×	×	×
A-	\checkmark	×	\checkmark	×	×	×	×	×
A+	\checkmark	\checkmark	\checkmark	\checkmark	×	×	×	×
B-	\checkmark	×	×	×	\checkmark	×	×	×
B+	\checkmark	\checkmark	×	×	\checkmark	\checkmark	×	×
AB-	\checkmark	×	\checkmark	×	\checkmark	×	\checkmark	×
AB+	\checkmark							

Testing blood

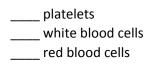
Exercise 6.1 Complete the text using the words below.

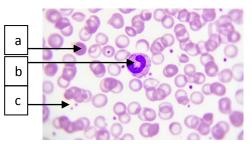
					-
	slide	drop	microscope	syringe	
	vein	test tube	pipette		
Use a		¹ to take some bloc	od from a	² in the p	oatient's arm. Put
the blood into		³ . Then, use a		⁴ to put a	5

of the blood onto a _____6. Examine it under a 7. What do you see?

Describing blood cells

Identify each type of blood cell in the picture below.





Find three or more mistakes in this description.

There are many rectangular red blood cells moving freely in the plasma. The centers of the red blood cells are a light color and the cells are all the same size. There are white blood cells in the diagram. They are more regular in shape than the larger red blood cells. There are many platelets in this drop of blood. They are small, dark, oval-shaped bodies.

A blood test

Exercise 6.2 Complete the description of a Complete Blood Count (CBC) with the words below.

infection	platelets	hemoglobin	clot
oxygen	red blood cells	white blood cells	

A CBC measures the number of different cells that make up the blood. It looks at:

______¹ - these take _____² from the lungs to the body's tissues, and take carbon dioxide away at the same time. The CBC also measures the amount of _____³ (a protein in the cells that carries oxygen), and looks at the size and shape of the cells.
 _____⁴ - these protect the body against _____⁵.
 ____⁶ - these make blood ____⁷.

B. Coronary

The Heart

Exercise 6.3 Complete the descriptions with the words in the box.

pump	leaves	valve	enters	artery	flows
atrium	fills	aorta	opens	closing	beat

The heart is a muscle as big as your fist in the center of the chest. It is an efficient ______1 that can get blood to the furthest cell in your body within sixty seconds. On its circular journey around the body, blood ______2 the heart twice, once with oxygen and once without oxygen. Blood without oxygen comes into the right side of the heart. It ______3 the right atrium. Then the tricuspid valve ______4 and the blood goes into the right ventricle. Then the pulmonary ______5 opens the blood ______6 through the pulmonary ______7. Blood carrying oxygen comes into the left side of the heart. The left _______8 fills, the mitral valve opens and the blood _______9 into the left ventricle. The aortic valve opens and the blood leaves through the _______10. When you listen to a heart _______11 you hear 'lub dub, lub dub'. This is the sound of the valves ________12.

Zero and First Conditional

• We use the Zero Conditional to talk about what always happens in a particular situation. It is often used to talk about scientific facts.

If you heat water to 100°C, it boils. When you get pregnant, you put on weight.

• The Present Simple tense is used in both parts of the sentence. What **happens** to the blood when you **take** aspirin?

- We use the First Conditional to talk about possible future actions or situations.
 If you remind me later, I'll come and help you.
 You won't get there on time if you don't hurry.
 You won't get there on time unless you hurry.
- We don't use *will / won't* after *if / when / unless*. We use the Present Simple. If **you go** through the swing doors, you'll see the office on the left.

Exercise 6.3 Complete the sentences using the Zero or the First Conditional.

If you explain the problem to Mew, she ______ (tell) you what to do.
 When you have an anesthetic, it _______ (stop) you from feeling pain.
 If I have time this evening, I ______ (help) you with your homework.
 You ______ (have) a fever if your temperature ______ (be) over 37.5°C.
 If a person's brain ______ (not get) oxygen, they ______ (die).
 If you ______ (take) a sleeping pill before you go to bed, you ______ (sleep) well tonight.

Speaking Activity

With a partner, write three scientific facts using the Zero Conditional, two true and one false. Read them to the class. They have to guess which one is false.

Reading

Blood Pattern Analysis

Even a tiny drop of blood at the scene of a violent crime can give important information to the police. Blood is there either because it has dripped out of a small wound, sprayed out from an artery, oozed out through a large wound, or flown off a weapon. Using blood pattern analysis, police can learn a lot about what happened from the shape of the blood drops.

Sometimes a murderer cleans the crime scene very carefully, and if detectives cannot see any blood they spray a chemical called Luminol across the scene. This makes it possible to see the blood in the dark. Luminol can show up very small drops of blood.

From the blood at the scene of a crime, police can learn about the person the blood came from. They can tell the person's blood type and, because male and female blood cells are different, they can also work out if the blood comes from a man or a woman. Also, 80% of us are 'secretors', which means our blood type is contained in other bodily fluids. This can also help identify suspects.

In 1984 a man, Graham Backhouse, was found injured near his home with deep cuts across his face and chest. A neighbor lay dead nearby. Backhouse said the neighbor attacked him, and so he shot the neighbor to defend himself. But the shape of the blood drops showed that Backhouse was standing still when he was wounded, and there was also no blood from Backhouse on his gun or near the victim. Police were sure Backhouse shot the victim and then wounded himself. He was found guilty of murder.

Exercise 6.5 Read the article and decide if these sentences are true or false.

- _____1. Blood from a cut artery drips out.
- _____2. Blood pattern analysis looks at the shape of drops of blood.
- _____3. Luminol tells you the blood type.
- _____4. Male blood is different from female blood.
- _____5. Graham Backhouse's neighbors shot himself.

Find words in the text with these meanings.

1. (used about a thick liquid) to move slowly	O
2. a knife, gun, or other things used to hurt people	w
3. saliva, semen, and other liquids in the body	b
4. people who the police believe committed a crime.	s
5. hurt by a weapon	W
6. responsible for a crime	g

Case Study

Three people have been seriously injured in a road accident, and brought to hospital. In one car was twelveyear-old Sally Cook and her 70-year-old grandfather William Cook. Sally has lost a lot of blood, and needs a transfusion. Her grandfather is unconscious and needs a bed on ICU and a ventilator to keep him alive. Fred Ellis is 21 years old, and was driving the second vehicle. Police say Fred caused the accident. He has severe injuries, and he will need a ventilator and a bed on ICU.

Discuss the following problems in small groups.

1. Sally's parents belong to a religious group which is against organ and blood donation. They do not want their daughter to have someone else's blood. Should the hospital respect their wishes, or should they give her transfusion?

2. There is only one bed available on ICU. Who should have the bed, William Cook or Fred Ellis?

3. Have you ever been in a car accident? Have you ever seen one? Describe what happened.

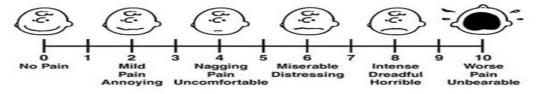
<u>Unit 7</u>

A. Pain

Pain is a basic bodily sensation that is induced by a noxious stimulus, is received by naked nerve endings, is characterized by physical discomfort (as pricking, throbbing, or aching), and typically leads to evasive action

Assessing Pain using the Pain Scale

Since pain is a symptom and can't be seen by the healthcare professional, we can ask the patient to rate their pain from 0 to 10, 0 as the lowest and 10 the highest.



Describing Pain

To be able to know specifically what type of pain the patients are feeling, healthcare workers can ask the patients to describe it using layman's terms. We can also use these descriptions if the patient can't describe their pain. Although it is subjective, we can't disregard what pain the patient is feeling and we should be sensitive to their needs.

Exercise 7.1 Match these words for types of pain with their descriptions.

1. a throbbing pain	a. feels like it is eating you
2. a sharp pain	b. travels fast along part of your body
3. a burning pain	c. is steady and not too painful
4. a stabbing pain	d. feels like a muscle is being squeezed
5. a shooting pain	e. feels like something sharp is stuck into you
6. a dull ache	f. comes and goes rhythmically
7. a gnawing pain	g. feels like fire
8. a cramping pain	h. is strong and sudden

Phrasal Verbs

Phrasal verbs are often used in informal spoken English. It is formed of a verb and a preposition. Both patients and healthcare professionals may use them in consultations. A phrasal verb may have several meanings according to context.

Exercise 7.2 Match the Phrasal Verbs and their meaning

1. bring on	a. lessen, reduce
2. bring up	b. happen in the end
3. carry on	c. gain
4. come on	d. commence, start
5. give up	e. expectorate, vomit
6. put on	f. cause, induce
7. turn out	g. continue
8. turn up	h. stop
9. cut down	i. appear unexpectedly
10. carry out	j. to complete a task

Exercise 7.3 Fill in the blanks with the correct phrasal verbs to complete the sentences.

- 1. When does the pain _____?
- 2. Is there anything special that ______ the pain?
- 3. When you cough, do you ______ any phlegm?
- 4. I've ______ a lot of weight last month or so.
- 5. The rash just ______ out of nowhere.
- 6. She had all the tests and it ______ to be cancer.
- 7. You should ______ on sweets, it causes tooth decay.
- 8. My advice is to ______ smoking.
- 9. We need to ______ surgery.
- 10. _____ taking the painkillers for another week.

Making comparisons

• We use comparatives to say how things are different.

These painkillers are **milder than** those.

Last night the pain was more severe than it was this morning.

- To make a comparative stronger, we often use much or a lot. You look **much better** today.
- The opposite of *more* is *less*.

It's much less sore than it was yesterday, thanks.

- We can use *more* and *less* with a noun to talk about quantity.
 - They have **more beds** in the City Hospital.
- We use superlatives to compare something to all other things of the same type. This is **the strongest** painkiller available without a prescription.
- The opposite of *most* is the *least*.
 - This is the **least serious** type of fracture.
- We can use *most* with a noun to talk about a large proportion of something. **Most women** choose to have pain relief when giving birth.

Exercise 7.4 Look at the information about these three painkillers. Complete the sentences, then write three more of your own.

Painkiller	Effective	Cost	Side effects
Nuradeine	\checkmark \checkmark \checkmark \checkmark	\$\$	\checkmark
Ibroxen	\checkmark	\$	$\checkmark \checkmark \checkmark$
Solpafen	$\sqrt{}$	\$\$\$\$	$\sqrt{}$

- 1. Nuradine is much ______ (effective) than Ibroxen.
- 2. Ibroxen is ______ (cheaper) than Nuradeine.
- 3. Ibroxen has ______ (side effects) than Nuradeine.
- 4. Nuradeine is ______ (effective).

5. _____ 6. _____ 7. _____

B. Death and Dying

Talking about dying

Talking about death to a patient or a family member is a sensitive matter and needs to be handled professionally and respectfully as possible. Here are words about death that you we can use.

Exercise 7.5 Match these words with a definition.

1. terminal	a. (of an accident or illness) that causes death
2. fatal	b. to become more and more weak or ill
3. go downhill	c. an examination of a body to find out how the person died
4. coma	d. the use of machines to keep a person alive
5. life-support	e. (of an illness) that cannot be cured, and causes death
6. pass away	f. a room in a hospital where dead bodies are taken and stored
7. mortuary	g. an unconscious state that a person cannot wake from
8. post-mortem	h. a polite word meaning 'to die'

Complete the sentences using the words above.

- 1. This boy has serious head injuries. He has been in a ______ for a week.
- 2. The patient stopped breathing, and is now on a _____ machine.
- 3. We need a porter to take the body to the ______.
- 4. I'm afraid your father ______ in his sleep last night.
- 5. There was a ______ accident outside the hospital both drivers were killed.
- 6. The ______ showed that the elderly lady died of a stroke.
- 7. After a bad fall, Mr. Deans ______ very fast and died the following week.
- 8. This gentleman has ______ cancer. With treatment, he may live another year.

The body after death

Exercise 7.6 What happens to the different parts of the body when we die? Complete the descriptions with the words in the box.

beating	breathing	slightly	cools	stops	
rigid	release	ceases	open	enlarge	

- 1. Brain activity ______.
- 2. The skin ______.
- 4. The pulse ______.
- 5. The jaw relaxes and opens ______.
- 6. _____ stops.
- 7. The heart stops ______.
- 8. The bowel and bladder ______ their contents.
- 9. The limbs become ______.

Reading

Read the article about a children's hospice, and match each of these headings to a paragraph.

- 1. Saying goodbye _____
- 2. Using the sense _____
- 3. A home from home _____
- 4. Personal care _____
- 5. Helping the family _____

The Hope Children's Hospice

А

The Hope Children's Hospice provides free specialist care for children with life-limiting conditions who are not expected to live into adulthood. It cares for up to eight terminally-ill children at one time, and aims to care for them in the same way their families would care for them at home. When families prefer to do the caring themselves, a hospice carer will go to their home and help them.

В

Life-limiting conditions present many long term medical and emotional problems – not only for the child, but for parents and siblings too. So the hospice offers respite care – short stays for child alone of for the whole family together. At these times, parents hand over responsibilities to the staff and have a 'holiday'. Short stays give terminally-ill children an opportunity to meet other with similar conditions.

С

Each child at the hospice has their own carer and their own care plan. A normal day might start with a jacuzzi bath followed by a massage from a complementary therapist. Some children go to school, while others play with hospice play specialists.

D

The hospice has a multi-sensory room. This is a special room which stimulates the children's sense with lights, music, touch, and smell. It has touch-screen computers, video games, paddling pools, and space for wheelchair dancing. Children have music therapy and can record their own music, not only as a way to express their feelings, but to leave something for their family and friends to listen to in the years to come. E

The hospice has a number of quiet rooms where we care for children during and after death. These are places where families and friends can say goodbye. Our support does not end with the death. We help not just grieving parents, but also siblings who are experiencing bereavement. We give everyone opportunities to discuss their fears about death and dying.

Answer the following questions about the article.

- 1. Do children have to stay at the hospice all the time?
- 2. How does the hospice help the children's families?
- 3. How many children does each carer look after?
- 4. What can children do in the multi-sensory room?
- 5. How is music used at the hospice?
- 6. How are the special quiet rooms used?



Speaking Activity

Student A

Read these guidelines for preparing the body. Then exchange information with Student B. Ask questions, for example: What do you do with the mouth? What about washing? etc. Make notes as you listen to Student B.

eyes	Close the eyes if you can. It is not always possible.	
mouth		
hair	Comb the hair. You may need to use a wet comb to make it tidy.	
washing		
position	Sit the body up on a pillow. Place the patient's arms b their sides and outside the bed sheets, so that relatives can touch or hold them.	
jewellery		
lines (IV, catheters, etc.)	If there is going to be an autopsy, leave all IVs and catheters in. If there is no autopsy, you can remove them. But remember that the site can bleed post-mortem, so cover these with gauze.	
the room		

Speaking Activity

Student B

Read these guidelines for preparing the body. Then exchange information with Student B. Ask questions, for example: What do you do with the eyes? What about the hair? etc. Make notes as you listen to Student A.

eyes		
mouth	Put dentures in if worn. These will be difficult to put in later. Try to close the mouth if possible. Putting petroleum jelly on the lips may help.	
hair		
washing	Wash the whole body. Make sure that the face and hands are perfectly clean before the family sees the body.	
position		
jewellery	Put this is a bag marked with the patient's name to give to the family.	
lines (IV, catheters, etc.)		
the room	Put chairs in the room for relatives to sit on. Put one or two boxes of tissue in the room. Clear away dirty linen, rubbish, and medical equipment that is no longer needed. Put on gentle music if appropriate.	

<u>Unit 8</u>

A. Activities of Daily Living

Activities of daily living (ADL) refer to the things we do in the course of our daily routine – often they are almost automatic, i.e. we do them without having to think about them. It is only when we are disabled in some way or when we are in a situation which is abnormal, that conscious effort has to be made. All therapy must include consideration of the following factors for each individual patient. We can use the mnemonic OATSS which stands for Occupation, Activity, Task, Skill, and Sequencing.

- Occupation refers to a habitual, balanced state of being and the ways each individual person maintains his/her health throughout life.
- Activity refers to doing specific things and productive action. Activity is necessary for man's survival and existence.
- Task is a component or one element of an activity.
- Skill is having the ability to do something well, i.e. having expertise. A skill can be acquired or learned.
- Sequencing is being able to link (join together) specific tasks in a logical order to complete an activity

Personal Care is one of the ADLs that is under self-maintenance.



Exercise 8.1 Six components of personal care that must be considered for each patient. What tasks and processes are involved in doing this activities? What do you think is the role of the nurse in each of these?

ADL	Patient's tasks and processes	Nurse's roles
Toileting		
Bathing		
eating / feeding		
dressing / grooming		
walking or moving around		
transferring		

Can or Can't /Could or Couldn't

Can and could expresses ability or are used to make polite requests or commands. Can is used for present abilities while could is used for past abilities. Can't is the short form of cannot and couldn't is the short form of could not. 'Can' and 'Could' are modal verbs and are always followed by the infinitive (V1). It stays in the same form for all persons. To make questions, switch the modal verb and the subject.

		positive	negative	
I / he / she / it /	Present	l can drink water.	They can't eat solid food.	
you / we / they Past		He could walk alone.	We couldn't save his life.	
		Yes / No questions	Short answers	
I / he / she / it /	Present	Can you move your left shoulder?	Yes, I can .	
you /wo /thou			No, I can't .	
you / we / they	Past	Could she raise her right leg?	Yes, she could .	
			No, she couldn't .	

You can only use can and could when you want to make a polite request.

e.g. Could you take off your shirt, please? Can you please untie your shoes?

Exercise 8.2

Arrange these words into polite requests and questions and rewrite them on the lines.

e.g. Could you puff your cheeks, please?

1. you / open / mouth / your / please? / Could ______

- 2. take / her / blood pressure? / Can / you
- 3. roll / right? / to / Could / please / you / your _____

4. raise / arm? / Can / you / his

5. bend / knees?/ Could / you / please / your

Exercise 8.3

The table below shows what Sally was able to do before and after her heart surgery. Write sentences using Can or Could and the information from the table.

e.g. Sally couldn't exercise before her surgery, but she can exercise now.

Activities	SN	RN	
eat junk food	\bigcirc	\bigcirc	1
climb the stairs	\bigcirc	\bigcirc	2
smoke	\bigcirc	\bigcirc	3
stand for long hours	\bigcirc	\bigcirc	4
drink alcohol	\bigcirc	\odot	5

B. Pressure Areas and Pressure Sores

The Norton Scale of Assessment is used to calculate the risk of pressure sores by recognizing a potential risk because sores can be prevented. These pressure sores start as a redness of the skin on the pressure points (or pressure areas) on the body – areas where there is not much fat or 'padding' over a bony prominence. The redness can easily become a sore when the skin breaks down. Some patients are more are risk than others and for this reason Norton Scale is used for assessment. Very thin people and those that are in poor nutritional state are at risk. Very heavy (obese) people are at risk because they are less likely to be mobile, and unconscious and paralyzed patients are at risk because they are unable to move. Incontinent patients are at risk because urine and feces 'burn' fragile skin tissue and the friction of wet skin surfaces on the bed and chair causes redness and damage to the skin.

orton Sc			15701105	-			_		_	
						-				
	PHYSICAL		MENTAL							TOTAL
	CONDITIO	N	CONDITIO	N	ACTIVITY	MOBILITY		INCONTINENT		SCORE
	Good	4	Alert	4	Ambulant 4	Full	4	Not	4	
	Fair	3	Apathetic	3	Walk/help 3	Slightly limited	3	Occasional	3	
	Poor	2	Confused	2	Chairbound 2	Very limited	2	Usually/urine	2	
	Very bad	1	Stupor	1	Bed 1	Immobile	1	Doubly	1	

How to use the Norton Scale

By adding the numbers from each column for the individual patient, the risk factor can be ascertained:

When the total score is 20, there is **no risk** at all. When the total score is 15-19, there is **low risk**. When the total score is 11-14, there is **medium risk**.

When the total score is 5-10, there is high risk.

Exercise 8.4 Check the body parts that may be considered pressure points in an unconscious or bedfast patient.

the shoulder blades	the sacrum	the back of the knees
the elbows	the chest	the perineum (between the genitals and anus)
the belly	the heels	the thighs
the buttocks	the outer ankles	the neck
the hips	the hands	the hips

Exercise 8.5 The following statements are either True or False. Write T or F and correct the false statements

- _____1. Patients are at risk of getting pressure sore have a high score on the Norton Scale.
- _____ 2. All patients in hospital are at risk of getting pressure sores.
- _____ 3. Patients who are incontinent of both urine and feces are at high risk
- _____4. The first sign of a pressure area is a small red area or an abrasion over a bony surface.
- _____ 5. Fat people are not at risk because they have 'protective padding'.
- _____ 6. Pressure areas can be prevented by keeping the skin clean and dry and by encouraging the patient to move and change his position or by turning unconscious or paralyzed patients every 2 hours.
- _____7. Ring pads, cushions and pillows can be used to keep the affected area off the surface of the bed.
- _____8. Special mattresses, called ripple mattresses, are available for immobile or unconscious patients. They are connected to a motor which circulates air inside the mattresses and increases the blood circulation.

Speaking Activity

Group into 4 to 5 people. Think of an admitted patient that you had and determine their risk factor for pressure sores. Share your experience with your group. Whoever had a patient with the highest score in will share it with the class.

Describing Appearance

Appearance is the way someone or something looks like.

In describing how people look we use adjectives. Start with the hair followed by the face. You can describe the hair by telling the length, texture, color respectively. Words that can be used to describe hair are short, long, medium length, straight, curly, wavy, dark, gray, red, brown and blonde.

When describing the face, you can start with the shape of the face, then the color of the eyes, size of the ears, nose, and lips. Words to describe the face are round, long, heart-shaped, square, chubby; describe the color of the eyes like black, brown, blue; size for the ears and nose for example small, medium, big or pointy; and thin or thick lips. For men, describe if they have facial hair like moustache and beard.

You can also describe the color of the skin like fair, tan, or dark.

For example:



He has got short, curly, gray hair. He has got a round face with black eyes, big ears, big nose, a moustache and a beard. He has got a tan skin.



She has got long, wavy, red hair. She has got a round face with black eyes, small nose, and thin lips. She has got a light skin.

Exercise 8.6 A. Describe the people in the pictures.





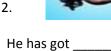
(27)

3.

She has got _	

1.

She has got ____



GAME: The Doctor is In

(The teacher should prepare the printable pages 46-48 beforehand)

1. Form groups of 3, 1 will be doctor, 1 will be nurse and 1 will be patient.

2. The doctors and the patients will stand on opposite sides of the room.

3. The patients will open an envelope containing information of people.

4. The patients will describe the picture to the nurses then the nurses will tell the doctors of the patient's appearance without looking at the paper.

5. Then, the doctors will look for the patient's chief complaint, diagnosis and treatment and will inform the nurse. The nurse will go back to the patient and tell them the information. The patient will use glue to paste the pieces of paper on the paper with the correct sequence.

6. The group who finishes first with the correct answers will be the winner.

<u>Unit 9</u>

A. Surgery

When you decide to be a scrub nurse or a circulating nurse in the OR, you have to be familiar with the things that the surgeon will use. Often times, nurses have to anticipate the instrument that the surgeon will need and have it ready before he even asks for it. Nurses should also be aware of the number of the instruments at all times to avoid causing unnecessary injury to the patient, and at the same time maintaining their sterility.



Exercise 9.1 Match each word with its description. How many of the items can you find in the pictures?

drapes	forceps	an implant	a swab	retractors
scalpel	suction	sutures	gown	staples

- _____1. a tool with a sharp blade for cutting
 - _____2. a scissor-like tool for gripping tissue
 - _____3. tubes attached to a pump for removing blood or other fluids from the surgical site
 - _____4. a device or artificial part that is inserted into the body, to replace or assist a defective part
- _____5. stitches that are inserted to close a wound
- _____6. sterile covers for the parts of the patient's body not involved in the operation
 - _____7. small piece of wire that are pushed with a machine into each side of a wound to close it
 - _____8. tools that hold organs out of the way to allow access to the surgical site
 - _____9. a loose sterile piece of clothing worn by people in the operating theatre
 - ____10. a piece of material, such as cotton, that is used to absorb blood during surgery

Preparing the patient for surgery

If you were having abdominal surgery, how much would the following things worry you? Mark them between 0 (it wouldn't worry me at all) and 5 (it would worry me a lot). Compare your answers with your partner.

- dying during surgery
- having the wrong operation done
- MRSA
- pain after the operation
- scarring

Future forms

will + infinitive

We use will / won't to talk about the future in general, and to make predictions, offers, or promises. The short form 'll is used in conversations. The negative form is *will not*, or more commonly, *won't*.

The scar **will fade** over the next few months.

You **won't be** able to drive after the operation.

be going to + infinitive

We use *be going to* to talk about intentions, schedules, or plans. A course of action has already been decided. I **am going to give** you some pain relief.

Is the doctor going to see me today?

should + infinitive

We can use *should* to mean 'probably' if it refers to an outcome with less certainty than will.

The scar **should fade** over the next few months.

may/might + infinitive

May and might have almost no difference in meaning. They are both used to talk about possibility. We **may / might have to** change your prescription.

Note: We can't use modal verbs after these forms. We use *be able to* instead of *can* and *have to* instead of *must*. NOT-You won't can't talk after the operation.

Exercise 9.2 Complete the sentences with the verbs below. Some of the verbs are used more than once.

be going to	ask	give	may	be	make	might	
let	wake up	will/'ll/won't	leave	should	feel	be able to	
a. I'm worried th	nat the anesthet	ic <u>won't be</u> stron	g enough, and	I	_ in pain, but	speak.	
b. If you like, I the anaesthetist to explain exactly what he does.							
c. It quite a neat little scar actually.							
d. In a moment I you a pre-med.							
e. How	I	when I _	?				
f. You	a little sic	k or you	really h	nungry.			

Exercise 9.3 Work in pairs and discuss the questions.

1. Which sentences in 9.2 predict or imagine the future?
2. Which sentence states someone's intention?
3. Which sentence includes an offer or promise to do something?
4. Which modal verbs are used to mean 'possibly'?
5. Which modal verb is used to mean 'probably, if everything goes well'?
6. In which sentences is a present tense used to talk about the future?

B. Post-operative Complications

Different types of surgery have different types of complications. Generally though, patients face the following risks. We should be aware of the signs and symptoms of these complications so we can detect them early and better prevent them for happening.

Exercise 9.4 Match the common complications 1-6 with the information about them A-F.

- A. Atelectasis
- B. Deep-vein thrombosis
- C. Low urine output
- D. Post-operative pain
- E. Post-operative wound infection
- F. Pyrexia

1	treated by antibiotics.
2	(fever) a symptom of infection either at the surgical site, in the lungs (for
	example, pulmonary edema) or in the urinary tract.
3	the standard treatment is by intramuscular opioid (usually Morphine).
4	after surgery, there is a tendency for patients to retain fluid, and urinary output is
	a measure of the performance of the liver and the kidneys.
5	this occurs when a blood clot develops, usually in the lower leg. It can cause a
	fatal pulmonary embolism. Early signs of the clot formation include
	hypertension and cold feet. Heparin is commonly used as a prophylactic (a
	course of action to prevent a disease)
6	(collapsed lung) caused by blocked air passages. One of the first signs is
	abnormally high heart rate (tachycardia) and abnormally rapid breathing
	(tachypnea). Mechanical ventilation is provided to help patients breathe.

Suffixes

Match the meanings 1-6 with the group of words a-f.

- a. cutting into
- b. making a puncture in order to drain off fluid or air
- c. making a passage from an organ to the skin
- d. optical examination
- e. surgical removal
- f. surgically changing the shape
- 1. thoracocentesis, amniocentesis, arthrocentesis
- 2. endoscopy, gastroscopy, colonoscopy
- 3. hysterectomy, vasectomy, tonsillectomy
- 4. trache<u>ostomy</u>, col<u>ostomy</u>, esoph<u>agostomy</u>
- 5. laparotomy, gastrotomy, nephrotomy
- 6. dermatoplasty, tympanoplasty, abdominoplasty

<u>Unit 10</u>

A. Caring for the Elderly

Exercise 10.1 Discuss the questions with a partner

- 1. Would you like to live in a care home when you are old? Why / Why not?
- 2. Think of an elderly person you know well and how ageing has affected them. Think about the answers to
- these questions. Then talk to your partner about the person.
- a. What daily tasks does he / she need help with?
- b. How does he / she keep physically fit?
- c. How happy is he / she?
- d. How healthy is he / she?
- e. What worries him / her?

3. Discuss what special difficulties are faced by elderly patients and the staff who are caring for them. Use the words below to help you, and write sentences. e.g. *They may have more side effects from drugs.*

medication	Ę	etting around	daily tasks	food
recovery	mind	home	complications	diagnosis

Alzheimer's disease

Exercise 10.2 Decide if each symptom is more connected with movement (M), thought (T), or behavior (B). Then compare your ideas with your partner.

Alzheimer's disease damages the brain, destroying memory and reason. People with Alzheimer's disease suffer confusion and loss of cognitive function. They need more and more nursing care as they become progressively more helpless, and finally die. The illness has three stages:

early stage

Curry Sta	age	
•	forgetting recent conversations or events	
٠	minor changes in abilities and behavior	
٠	repetition	
middle	stage	
٠	needing some help with ADLs	
٠	wandering	
•	loss of interest in other people	
•	unusual behavior	
•	shuffling gait	
later sta	age	
•	needing constant help with ADLs	
•	forgetting names	
•	complete loss of memory	
•	inability to recognize people, objects or places	
•	getting easily upset or aggressive	
•	confusing night and day	
•	confinement to bed or a wheelchair	
•	difficulty in swallowing	
•	loss of speech	

Will

We use will:

- to talk about future facts.
 - In twenty years time, there **will be** more old people and fewer young people.
- to make predictions and express hopes about the future. We often use words such as *I think, I hope,* and *probably* when we do this.
 - I think I'll die when I'm 90!
 I don't think I'll play sport when I'm 80.
 I hope I won't live in a care home.
 With family around, you'll probably have a long and healthy old age.
- when we decide what to do, have, etc.
 Tea or coffee? Er ... I'll have coffee, please.
- to make offers, requests, and promises. We can also use Shall I...? for offers.
 I'll get you a drink.
 Shall I get you something to eat?
 Will you do me a favor?
 - I won't be back late, so don't worry.

Exercise 10.3 Complete the sentences with the words below. Then decide if each one is a future fact (F), a prediction (P), or a decision you're making (D).

	'll be able	'll have	'll probably
	'll sleep	Shall I	will open
1. The new hospital 2. I don't think you		_ in 2010. _ tonight if you have a na	ip now

3. ______ go out tonight? Er ... no, I think I'll stay at home.

4. You _______to go home a week after your operation.

5. I ______ chicken curry with rice, please.

6. I'm working tonight, so I ______ be tired tomorrow.

Exercise 10.4 Complete this dialogue of offers and requests. Use 'll, will, or won't and add one of the verbs

below.						
	fall	pass	stand	do	see	
A:	¹ you	² me	my glasses? Ther	n I	³ be able to	4 the
television.						
B: Here you	u are.					
A: Thanks.	Oh and	⁵ you	⁶ r	ne another fa	avor?	
B: What no	w?					
A:	⁷ you help	me	⁸ up? I wan	t to switch it	on.	
B: You	⁹ pro	bably	¹⁰ over	. I	¹¹ do it.	
A. Thank v		¹² troub	le vou again.			

B. Problems and aids

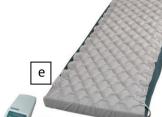
Exercise 10.5 Work in pairs. Match the adjectives with the cases. Say the adjectives as you do the exercises. An elderly person who ...

1. cannot leave her bed	a. frail
2. often wets himself	b. immobile
3. breaks a bone easily	c. bedridden
4. can't hear very well	d. confused
5. cannot move around freely	e. independent
6. often can't remember things	f. forgetful
7. wears his pyjamas in the street	g. incontinent
8. can't see very well	h. shortsighted
9. likes to be free	i. deaf
Exercise 10.6 Match each vocabulary item with a picture.	

- ____1. hearing aid
- ____2. walking stick
- ____3. glasses
- ____4. pressure bed
- ____5. incontinence pad
- ____6. bath lift















____7. power chair

9. false teeth

____10. artificial hip

____11. walking frame

__12. commode

___8. helping hand





Print this page and give a copy to the doctors

Picture	Chief Complaint	Diagnosis	Treatment
S	painful jaw	locked Jaw	NSAIDS
	difficulty in breathing	asthma	Albuterol
	watery stools	diarrhea	Loperamide
CO.	stomach ache	appendicitis	surgery
0	high body temperature	fever	paracetamol
	frequent urination	incontinence	anticholinergics
	difficulty in hearing	earwax blockage	earwax drip
	paleness and fatigue	iron deficiency anemia	Iron supplements
	chest pain	GERD	antacids
	nausea and vomiting	pregnant	vitamin B6

Print this page and give a copy to the patients.

Picture	Chief Complaint	Diagnosis	Treatment
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Picture	Complaint	Diagnosis	Treatment
	painful jaw	locked Jaw	NSAIDS
	difficulty in breathing	asthma	Albuterol
	watery stools	diarrhea	Loperamide
	stomach ache	appendicitis	surgery
	high body temperature	fever	paracetamol
	frequent urination	incontinence	anticholinergics
	difficulty in hearing	earwax blockage	earwax drip
	paleness and fatigue	iron deficiency anemia	Iron supplements
	chest pain	GERD	antacids
	nausea and vomiting	pregnant	vitamin B6

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