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# ENGLISH FOR NURSING

- 1. Introduction to Health Professions
- 2. Anatomy and Physiology of the Human Body
- 3. Introduction to the Hospital
- 4. The Nursing Process

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Yogyakarta, 23 Oktober 2020 Ketua Mejelis Pendidikan Tinggi Penelitian dan Pengembangan Pimpinan Pusat Muhammadiyah

Prof. H. Lincolin Arsyad, M.Sc., Ph.D.

It is with great pride that I commend this publication to you. It represents so much more than the collection of carefully worked through teaching resources presented here. The resources themselves are properly contextualised, developed for the needs of the students and the teaching and learning culture specific to Muhammadiyah universities, but it is the spirit of collaboration facilitating their creation that is remarkable. Teachers have come together across Indonesia and across disciplines (English and Nursing) to generate new productive professional networks for lasting benefit. My sincere wish is that these connections nurture consistency, quality and great results. I also encourage new collaborative enterprises that may flow from completing this work.

As educationalists we celebrate learning. In facilitating this project, we at Holmesglen have learned much from you and find so much to respect and value in the partnership between our organisations. Long may these learning partnerships continue!

Adam Kilburn November 2020

#### Module 1

# Introduction to Health Professions English for Nursing 1



# **1.1 Language for Greetings and Introductions**

1. Look at the following pictures. With your partner, match the people in the pictures to their jobs.



nurse (n)	radiologist (n)	pharmacist (n)
/nɜːs/	/ˌreɪ.diˈɒl.ə.dʒɪst/	/ˈfɑː.mə.sɪst/
nutritionist (n)	doctor (n)	physiotherapist (n)
/njuːˈtrɪʃ.ən.ɪst/	/ˈdɒk.tər/	/ˌfɪz.i.əʊˈθer.ə.pɪst/

2. Quickly read the following dialogue between Sandra, Jessica, Susan and Harrison. Where are they?

Sandra:	Good morning Jessica.
Jessica:	Hi Nurse Sandra.
Sandra:	Jessica, it's now 07.30 am and I am going to end my shift. This is Nurse Susan, your nurse for the next shift.
Susan:	Hi Sandra, I'm Susan, your nurse. I will be in charge of your nursing treatment during your hospitalization in this shift, but I also will get help from other nurses, like Sandra.
Jessica:	Alright, Nurse Susan. Nice to meet you.
Susan:	How are you feeling right now?
Jessica:	I have a headache and feel nauseous. I can't take any food or have my breakfast either since the smell triggers my nausea.
Susan:	You can eat bite by bite. Please do this.
Jessica:	I'll do it.
Susan:	I'll check in with you again at 9 am for vital signs.
Jessica:	Ok, thank you.

In another session, Susan introduces Harrison to Jessica.

Susan:	Hello, good morning Jessica.
Jessica:	Hi Susan, morning.
Susan:	Jessica, I come here with Dr. Harrison.
Harrison:	Hi Jessica, I'm Dr. Harrison, your primary doctor.
Jessica:	Good morning, Dr. Harrison.
Harrison:	I'm going to ask you some questions related to your complaint and examine you.
Jessica:	Okay.
Harrison:	Nurse Susan, may I know her situation?

Susan:	Jessica is 43 years old, her blood exam from the lab shows that her random blood glucose is 280 mg/dl. She now has a headache and is feeling nauseated.
Harrison:	Alright, thank you nurse Susan. Ms. Jessica, how is your nausea?
Jessica:	It is quite bad I think, I feel like I'm going to throw up every time I smell food, thus I couldn't have anything, not even a spoon of food.
Harrison:	Okay, how many days have you been feeling like this?
Jessica:	It's been about 4 days, that's why I am feeling so weak.
Harrison:	Well, how about your headache?
Jessica:	l feel a bit dizzy right now.
Harrison:	Okay, Jessica we will continue observing your condition and will run further examinations, for your body weight as well as your blood glucose levels. Moreover, we will ask a nutritionist to see you to discuss your diet and food choices. For the meantime, I will prescribe an anti-emetic for your nausea. Do you have any drug allergies that you know of?
Jessica:	No, I don't have any drug allergies that I know of.
Harrison:	Alright, I will visit you again tomorrow at 8 o'clock in the morning.
Jessica:	Okay, thank you, Doctor.
Harrison:	You're welcome.
Susan:	Alright Jessica I will organise to have a nutritionist come see you in about a half an hour.

#### 3. Answer the following questions.

- 1. Who is Sandra?
- 2. Who is hospitalized?
- 3. Who is Harrison?

- 4. How did Sandra greet Jessica?
- 5. How did Sandra introduce Susan?
- 6. Who is the nurse in charge after the morning shift?
- 4. Practice your pronunciation with your teacher and your peers. First, listen to your teacher and repeat.
  - Hello / Hi Good morning / good afternoon / good evening Good / Nice to see you again I'm glad / happy / pleased to see you.

#### Now, work in pairs and practice asking questions and answering

How are you?	Fine, thanks. And you?
How have you been?	Very well. And you?
How are things?	Not too bad, thanks.
How is your?	She/he is fine.

#### Listen to your teacher and repeat

May I introduce myself? My name's .... Let me introduce myself. My name's .... I'd like to introduce myself. I'm.... I don't think we've met. I'm.... May I introduce a good friend of mine? This is.... Have you met ...? I'd like you to meet ....

Work with your partner and practice saying the following

How do you do?	How do you do?
Nice to meet you.	Nice to meet you, too.
Please, call me	Then you must call me

- 5. Study the language expressions above. Identify which language expressions are used...
  - a. to greet people Write **G** (Greeting) after the expressions.
  - b. to introduce yourself Write **SI** (Self Introduction) after the expressions.
  - c. to introduce others Write **IO** (Introducing others) after the expressions.
- 6. What would you say if you met someone at the following time of the day?

a.	7.00	
b.	10.00	
C.	12.00	
d.	15.00	
e.	18.00	
f.	21.00	

7. Complete the following conversations with the most appropriate words or phrases.

а.	Anne	Excuse me, I am Nurse Anne.	
	Lucky		
	Anne	I'll be your primary nurse.	
b.	Aaron		
	Katherine	Good to see you again.	
	Aaron	If you need a nurse's help, please press the button.	
C.	Diana	Hi Natalie. This morning, I am with Doctor Cameron.	
	Cameron		
	Natalie	Nice to meet you, Doctor.	

d.	Diana	He will visit you every day at about 08.00 in the morning.
	Natalie	
	Diana	Ok, I'll see you later.
	Natalie	

8. How would you reply to the following phrases? Choose an appropriate response.

a.	Hi.	
b.	Nice to meet you.	
C.	Here is the nurse today. She is Nurse Dina.	
e.	How do you do?	
f.	I will introduce you to Dr. Avicenna.	
g.	I don't think we have met.	
h.	Please call me Jose.	

- 9. Work in pairs or in a small group. Make a dialogue for one of the following situations and perform it in front of the class.
  - a. You are a new nurse in the hospital. You are to introduce yourself to the nurse in the same nursing station.
  - b. You are a primary nurse. You meet a patient for the first time.
  - c. You are a doctor on your first visit to an elderly patient.
  - d. A patient is introduced to another nurse before shift change.

Introduction to Health Profest English for Nursing 1

### **1.2 Grammar for Questions and Question Words**

1. Match the profession and the responsibility. Check your answer with a partner.

1.	doctor (n) /ˈdɒk.tər/	а	<ul> <li>provides and manages the care of individual patients</li> </ul>
2.	physiotherapist (n) /ˌfɪz.i.əʊˈθer.ə.pɪst/	b	. diagnoses symptoms and recommend treatment
3.	midwife (n) /ˈmɪd.waɪf/	с	<ul> <li>provides medical treatment to women, on issues related to the reproductive system</li> </ul>
4.	nurse (n) /nɜːs/	d	. offers individual care to pregnant women and their babies
5.	gynaecologist (n) /ˌgaɪ.nəˈkɒl.ə.dʒɪst/	e	<ul> <li>assists patients in rehabilitating physical problems caused by illness, injury, disability, or aging, through treatment</li> </ul>

2. Now scan the following text and check your answers.

#### **Hospital Teams**

Many people work in hospitals with different jobs. Here is a list of the professionals you will probably work with in certain hospitals. This team generally consists of a client, the client's family and/or caregiver, medical professionals, nurses, nutritionists, social workers, and rehabilitation therapists (occupational therapists, physical therapists, speech therapists, and recreational therapists). Typical members of a healthcare team are a doctor and a registered nurse. In addition, there are a nutritionist, a physical therapist, a psychologist, an occupational therapist, and/or social workers who may be part of the team. Here is a description of a medical team member's duty.

#### **Doctor/Physician/General Practitioner**

The doctors diagnose symptoms and recommend treatment, including prescribing drugs for patients. They have a wide range of clinical experience. They range from newly qualified junior doctors to senior consultants. There are also specialists who work in their specific field, for instance: surgeon, internist, pediatrician, and gynecologist.

#### Surgeons

Surgeon is a medical specialist who treats diseases, injuries, and deformities by invasive, minimally invasive, or non-invasive surgical methods. A surgeon also has to examine patients to obtain information on medical conditions and surgical risk. A surgeon will perform a surgery in an operation theatre.

#### Gynecologists

A gynecologist provides medical treatment to women, focusing on issues related to the reproductive system. They may perform annual testing and exams, diagnose illnesses and infections, treat hormonal abnormalities, prescribe medication and counsel patients about birth control or fertility options

#### Midwives

Midwives offer individual care to pregnant women and their babies. They assist women during labour on the obstetric ward and in the delivery unit.

#### Nurses

Nurses work in a variety of settings to provide and manage the care of individual patients. They work closely with doctors and other healthcare professionals. Nurses mainly take care of patients' symptoms and basic needs for 24 hours. Nurses leave home at night when it comes to a night shift. Furthermore, there are many advanced practice nurses or nurse specialists such as wound care nurses, osteoma nurses, maternity nurses, pediatric nurses etc.

#### Ward managers / Head Nurse

The ward managers are senior nurses who oversee the budgets, staff and medical care of patients on their ward.

#### **Dieticians/Nutritionists**

Dieticians / nutritionists work with patients to promote nutritional wellbeing. A nutritionist would assess patients' and clients' health needs and diet. They provide counselling for patients related to nutrition issues, healthy eating habits, and develop meal plans for the clients.

#### **Physiotherapists**

Physiotherapists assist patients in rehabilitating physical problems caused by illness, injury, disability, or aging, through treatment. The responsibilities of Physiotherapists include planning treatments, reviewing recovery, and conducting therapeutic exercises with patients.

#### Radiologists

A radiologist is a medical doctor who is trained in executing and interpreting medical images such as X-rays, CT scans, ultrasounds, and MRIs and using them to treat health problems in patients. Radiologists perform image-guided procedures but do not normally handle the general medical needs of a patient.

3. Study the following Question Words and their functions.

<b>Question Words</b> Here are four question words that can be used to ask certain types of questions.				
Question Words	Function	Example		
Who	It is used when asking about <b>people or a person</b> .	Who is he? Who are they?		
Where	It is used when asking in or at what <b>place.</b>	Where is RSUD Sardjito? Where does Dr. Ramli work?		
What	It is used when asking for information about <b>something.</b>	What is his job? What is his name?		
When	It is used when asking about <b>time.</b>	When is the labour? When do they leave?		

4. Read the above text again. With your partner, add the question words used and then answer the following questions. The first one has been done for you.

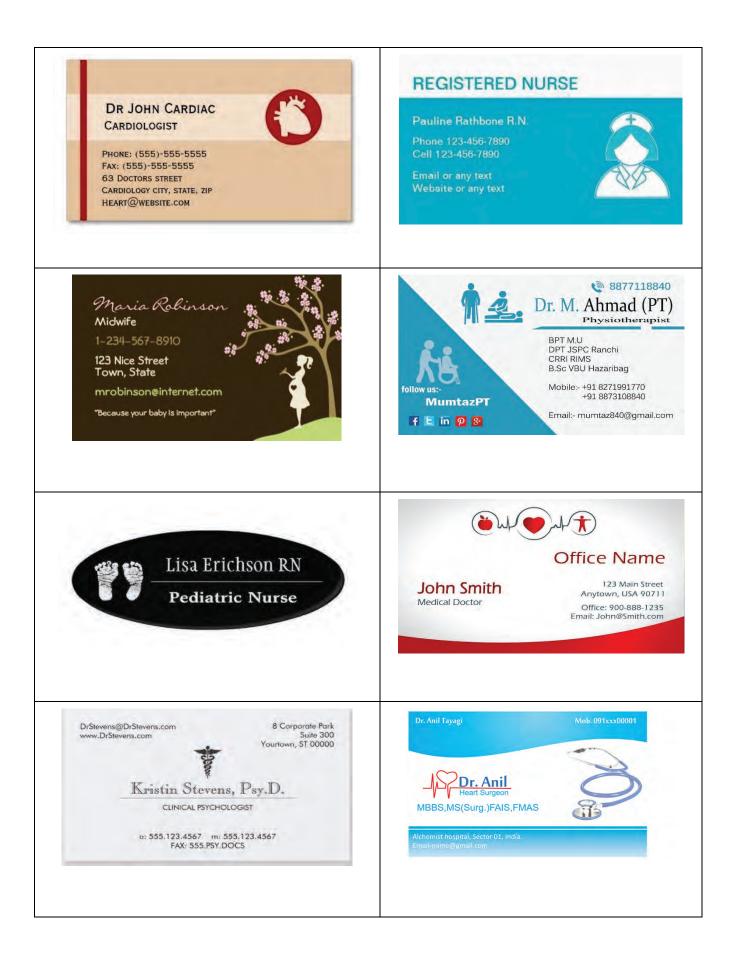
	a.	What do doctors do?
		Doctors have medical certification to treat people who are hurt or ill.
	b.	is a surgeon?
	C.	does a gynecologist do in a counselling with patients?
	d.	do midwives assist women during labour?
	e.	do nurses leave home for a night shift?
5.	With a pa	artner, use the information from the reading to write questions.
	a.	What?
	b.	Who?
	C.	Where?
	d.	When:?

6. Ask and answer your questions with another pair.

7. Decide on the most suitable question words (what, where, who, when) for the incomplete sentences.

a.	Andika	is Doctor Jose Rizal from?
	Arif	He is from Padang.
b.	Rahma	is Ms. Hanifa?
	Ronald	She is a nurse.
C.	Hendry	do you start your night shift?
	Irene	Tomorrow night.
d.	Celine	is the doctor's name?
	Merry	It's Dr. Mathew Wright
e.	Alex	is in charge of Mrs. Merry's treatment today?
	Pauline	It's Nurse Maxy

- 8. Study the business cards of some medical teams and answer the following questions.
  - 1. Where does Mr John Cardiac live?
  - 2. What does Ms Rathbone do?
  - 3. Among them, who are doctors?
  - 4. How can be Ahmad be contacted?
  - 5. Who mostly works or deals with young /child patients?



9. First, study the schedule of nurses in a hospital.

				1
Employee	Wednesday	Thursday	Friday	Saturday
	7/15/2009	7/16/2009	7/17/2009	7/18/2009
Snyder, Molly	Swing Shift	Swing Shift	Night Shift	Night Shift
Head Nurse	Cardiac Care U	Cardiac Care U	Cardiac Care U	Cardiac Care
Cardiac Care Unit	3:00 PM-11:00	3:00 PM-11:00	11:00 PM-7:00	11:00 PM-7:0
Garcia, Adam Registered Nurse Cardiac Care Unit	Swing Shift Cardiac Care U 3:00 PM-11:00 <b>)</b>	Vacation 💮	Vacation	Night Shift Cardiac Care 11:00 PM-7:0
Hawk, Danielle	Swing Shift	Swing Shift	Night Shift	Night Shift
Registered Nurse	Cardiac Care U	Cardiac Care U	Cardiac Care U	Cardiac Care
Cardiac Care Unit	3:00 PM-11:00	3:00 PM-11:00	11:00 PM-7:00	11:00 PM-7:0
Kilroy, Trenton	Swing Shift	Swing Shift	Day Shift	Jury Duty
Registered Nurse	Cardiac Care U	Cardiac Care U	Cardiac Care U	
Cardiac Care Unit	3:00 PM-11:00	3:00 PM-11:00	7:00 AM-3:00 PMar	
Sampson, Peter	Swing Shift	Swing Shift	Day Shift	Day Shift
Registered Nurse	Cardiac Care U	Cardian Caro II	Cardiao, Caro, U	Çardiac Care
Cardiac Care Unit	3:00 PM-11:00	7/15/2009 Samp	son, Peter	1:00 AM-3:00
Anderson, Lyndon LP/LV Nurse Cardiac Care Unit	Swing Shift Cardiac Care U 3:00 PM-11:00	<ul> <li>Swing Shift (S) 3:00 PM - 11:00</li> <li>PM</li> <li>Cardiac Care Unit (CCU)</li> </ul>		
Munoz, Crystal LP/LV Nurse Cardiac Care Unit	Swing Shift Cardiac Care U 3:00 PM-11:00		5:00 PM - 6:00 PM	
Anderson, Cory	Swing Shift	Swing Shift	Swing Shift	Swing Shift

10. Now complete the sentences with a question word. Check your answer in pairs.

- a. ..... is the head nurse? *Molly Snyder.*
- b. ...... time is the swing shift in the Cardio Care Unit?
- c. ...... doesn't Garcia Adam work?
- d. ..... is Lyndon Anderson?
- e. ...... do all employees work at the hospital?
- f. ..... is taking a vacation?
- g. ..... day is Trenton Kilroy on Jury Duty?

11. Work in a group of three. Choose a role for yourself first and complete the first row with information about yourself. Then ask questions to find out more about the schedules of the other students.

For example, 'What's your role?', 'What days do you work during the week?' or 'What time does your shift start on Wednesday?'

	Name	Profession	<b>Do you work on?</b> Yes $()$ if you work, No (X) if you don't. <b>What time do you work on?</b> Write when you work that day.						
			Mon	Tue	Wed	Thu	Fri	Sat	Sun
1									
2									
3									

# **1.3 Vocabulary to Talk about Hospital Teams**

1. Read the following text and underline all the words indicating medical equipment. The first one has been done for you.

Medical equipment might refer to both very complex devices used by professionals as well as to simple instruments. Let's see what equipment is used when you catch influenza. Imagine you wake up in the morning with a terrible headache, feeling feverish. You quickly phone the boss and say you need a day off, then grab a <u>thermometer</u> to take the temperature. Gosh, it's 102 degrees Fahrenheit! You really need to go to the doctor. After you arrive at your local clinic and wait some time in a queue, the GP asks you in. She asks what is wrong and then puts a tongue depressor in your mouth to see your throat. Then she asks you to take off your sweater and uses a stethoscope to listen to your chest.

What about other examples? Let's see what equipment might be used in case of a broken bone. It's mid-February and you are skiing. You are having an amazing time, but you fall and feel terrible pain in both your shin and your arm. You have probably broken your arm and your leg! It's so painful you can't move so you call out mountain rescue. They come by chopper, put you on a stretcher, use a splint to immobilize your limbs and take you to the hospital. You are told you have broken your leg and it's put in a cast. If you're lucky and your arm is not broken, it's only wrapped in a bandage and you have to wear a sling. As a result, walking on crutches is out of the question, so you leave the hospital in a wheelchair.

Various types of medical equipment, ranging from basic tools to highly advanced cutting-edge devices, are used in very different situations. One thing is certain - each piece has been developed to help us recover or even save our lives. And we might need them at the very beginning of our lives - as is the case with an incubator, which is used in neonatal units to help or treat prematurely born children.<sup>1</sup>

2. Check with your partner, did you get them all? Together, list the names of medical equipment and write a brief description of what they are used for.

	=
b.	=
C.	=
d.	=
e.	=
f.	=
g.	=
h.	=
i.	=
j.	=
•••••	

<sup>1</sup> MedicalEnglish. (2020). Medical Equipment. Retrieved from https://www.medicalenglish.com/unit/2/reading

a.	
C.	
d.	
-	
j.	

4. Below are tools commonly used by nurses. Match the word to the picture.

surgical mask	thermometer	gauze bandage
tweezers	sphygmomanometer	medical trolley
hand gloves	stethoscope	scales



5. In this pronunciation exercise, draw a line to match the phonemic transcription to the vocabulary below. Practice pronouncing the words with your partner.

Words				
1.	surgical mask			
2.	hand gloves			
3.	thermometer			
4.	gauze bandage			
5.	medical trolley			

6. sphygmomanometer

Pronunciation			
a. /ˈθəˈmɑː.mə.ţəː/			
b. /'sə dʒɪkl mæsk/			
c. /' gaːz ˈbændɪdʒ'/			
d. /' sfig-mō-mə-ˈnä-mə-tər'/			
e. /'hænd gl∧v'/			
f. /'medɪkl ˈtraː.li'/			

6. The following words are taken from the reading texts in this unit and categorized into nouns, adjectives and verbs. Draw a line to match each word with its definition.

Nouns	Meanings
discharge	all the chemical processes in your body, especially those that cause food to be used for energy and growth
respiration	official permission to leave a hospital
pulse	an uncomfortable feeling of nervousness
allergy	the action of breathing
anxiety	a medical condition in which your blood pressure is extremely high
metabolism	the beating of the heart
hypertension	a damaging immune response by the body to a substance, especially pollen, fur, a particular food, or dust, to which it has become hypersensitive

Adjectives	Meanings
acute	causing or likely to cause harm.
chronic	moving into all areas of something, difficult to stop
harmful	very serious or severe
invasive	poisonous

Verbs	Meanings
painful	relating to the medical care given to pregnant women before their babies are born
antenatal	causing emotional or physical pain
toxic	continuing for a long time

cure	to order treatment for someone, or to say what someone should do or use to treat an illness or injury
diagnose	to make someone with an illness healthy again
prescribe	to become completely well again after an illness or injury
check	to cover or surround something with paper, cloth, or other materials
wrap	to recognize and name the exact character of a disease or a problem, by examining it
recover	to use a needle and syringe to put a liquid such as a drug into a person's body.
immobilize	to make certain that something or someone is correct or safe
inject	to stop something or someone from moving

7. Match each of the words below to a stress pattern and check with your partner.

		-
a.	assessment	λ
b.	thermometer	
c.	sphygmomanometer	
d.	stethoscope	
e.	diagnose	
f.	nutritionist	
g.	anxiety	]

	•	
$\setminus$		
\	.•.	assessment
	•	

h. dehydration	•.	
i. hypertension		
j. incubator	•••●••	

8. In pairs, complete the sentences with the words in the boxes

incubator (n)	nutritionist (n)	examine (v)
premature (adj)	thermometer (n)	

- a. ....is recording and transmitting fevers in real time.
- b. Too much exposure to the sun can cause the .....aging of skin.
- c. The newly born baby needed a special treatment. Therefore, she was put in an .....
- d. ..... recommends the patient to have more fruits and vegetables containing vitamin C such as orange, guava, broccoli, and pumpkin.
- e. A doctor ...... his exact physical condition immediately after he was sent to the emergency room.

9. As if you were a nurse, use the following words in sentences you would say to your doctor about a patient.

dehydration (n)	diagnose (v)	painful (adj)
/ˌdiː.haɪˈdreɪ.ʃən/	/ˈdaɪ.əg.nəʊz/	/ˈpeɪn.fəl/
feel (v) /fiːl/	bandage (n) /ˈbæn.dɪdʒ/	

- a. .....
  b. ....
  c. ....
  d. ....
  e. ...
- 10. Looking back through this unit, find and list five more words that are new for you and hard to remember. Use them in an example sentence below. Identify their part of speech (noun, verb, adjective or adverb).

Word	Sentence

### **1.4 Writing a Nursing Assessment Form**

1. Read the text below quickly and put a cross "x" if you did not find the data in the nursing assessment form below.

0 \$

□ personal identity	□ nationality	□ family
□ medical history	□ recent history	□ social background
range of time showing when treated	□ name of medical staff	

#### 25/07/2020

#### Notes

Dewi Wardoyo was admitted through the Children's Emergency Department for acute meningoencephalitis as a result of a complication following mumps.

#### **Patient History**

Address: 32 Sexton St, Ekibin Phone: +62 85 1966 6231 Date of Birth: 23 May 2008 Admitted: 15 July 2012 Gender: Male

Discharged: 25 July 2012 Country of Birth: Indonesia Diagnosis: Acute Meningoencephalitis

#### **Social History**

Parents: Miri and Abyasa Wardoyo, refugees arrived in Australia in 2011 Employment: Abdullah; Golden Circle Pineapple Factory, shift worker and Miri Housewife

Accommodation: Recently moved to Rental Accommodation

Siblings: 2-year-old brother, Ahmad

Language: Bahasa Indonesia, Javanese

Interpreter needs: Abyasa understands spoken English but has limited written skills. Miri has limited understanding of English.

#### **Medical History**

Parents state that both children had some kind of vaccination at birth, but the vaccination record has been lost. Parents unaware of vaccine for Mumps

#### **Discharge Plan**

Appear to have fully recovered from mumps and Acute Meningoencephalitis. Will need advice on recommended vaccines for both children. Will need neurological check-up.

# Often a short chunk of language, i.e. word or phrase bears a complete message. We can use some of the data contained in a nursing assessment form as examples.

- 2. Read the Nursing Assessment form again. Answer these questions.
  - a. What is the patient's name? .....
  - b. What was the diagnosis? .....
  - c. Where does the father work? .....
  - d. Who is Ahmad? .....
  - e. What vaccination may the patient get? .....

#### 3. Write at least 3 examples of the possible required data for a nurse assessment form.

a.	Social history:
b.	Medical history:
c.	Discharge plan:,

4. Read the case below and fill in the following nursing assessment form.

A male patient aged 42 years old is admitted to a clinic. He is diagnosed with hypertension. The patient's data are as follow: the patient feels uneasy, shortness of breath, headache and backpain, blood pressure 145/90 mmHg, respiration rate 18x/minute, pulse 84x/minute, body temperature 36.5<sup>o</sup>C.

Personal data	
Name	James Jacobson
Hospital No	RH016458
Phone number	+628523459185
Address	Sudirman street, no.22B. Semarang city,
Job	Farmer
Admission Date	22 March 2020
Smoking history	5 years

NURSING ASSESSMENT FORM			
Patient Information			
Patient's initial name			
HN			
Age			
Gender	Female Male		
Marital Status			
Employment			
Address			
Medical Diagnosis			
Patient's main complaint			
Patient's recent health history			
neallinnisiory			

- 5. With a partner, each prepare a set of data on a patient. Ask your partner questions in order to complete a Nursing Assessment Form following the instructions below.
  - a. You are working with another nurse.
  - b. You ask the nurse for a recent update on the condition of a patient.
  - c. Take notes on the data reported.
  - d. Fill in the data in a nurse assessment form.

NURSING ASSESSMENT FORM			
Patient			
Information			
Patient's initial			
name			
HN			
Age			
Gender	Female Male		
Marital Status			
Employment			
Address			
Medical Diagnosis			
Patient's main complaint			
Patient's recent health history			
nealth history			

6. First, read the information about Annisa, Rizky and Fajar's daily routines and then complete the writing task below.

	Annisa is a Surgical Nurse	<b>Rizky</b> is a Psychologist	<b>Fajar</b> is a Nursing Lecturer
7 – 8 am	Meeting with her team, nursing pre- conference, begin work	Wake up, have a cup of coffee, take a bath	Get up, prepare breakfast
8 – 10 am	Assess patients	Go to the gym, drive to work	Drive to work, give consultation to patients at clinic
10 – 12 am	Preparing patients for surgical procedures	Have a meeting	Read some documents, write email, answer phone calls
12– 1 pm	Have lunch, meet with head nurse	Have lunch, read some reports	Have lunch, hangs out with colleagues
1 –4 pm	Have nursing round with physician, nutritionist and other nurses	Teach a class	Visit parents
4 –6 pm	Pick up kids from daycare, cook some food	Drive home, do housework	Go to cinema
6 –9 pm	Study some reports, listen to music, watch tv	Have dinner, hang out with friends	Prepare for night shift at hospital, report to his supervisor

7. Choose one of the people above. Write a short paragraph describing a daily routine. Remember to use simple present and verb to be. Introduction to Health Professi English for Nursing 1

# 2.1 Language for Making Requests

- 1. With a partner, discuss the following prompts
  - a. Have you ever seen a surgery room in a hospital?
  - b. What professions need to work together in surgery?



2. Read the dialogues and underline the request expressions with your partner.

For example:Doctor May I see the status of the patient who arrived this afternoon?NurseOf course, doctor, here it is.

 Doctor:
 Good morning, nurse.

 Nurse:
 Good morning, doctor. Dr Ahmer suggested I consult you on this patient.

 If you are not too busy, would you have time at the moment?

Doctor: Of course. How is the patient's condition? Are there any problems?

- Nurse: Yes doctor, unfortunately, there are some problems. He ate some salty fish, and as a result, his blood pressure is high. Is there any additional medicine for him, doctor?
- Doctor: Oh, yes, nurse. I am going to give you a prescription for some tablets containing 10 mg of amlodipine and 5 mg of candesartan 5.
- Nurse: I am sorry, doctor. Can you repeat that, please?
- Doctor: Amlodipine and candesartan. They are going to help him achieve the normal blood pressure.

Nurse: Thank you, doctor. May I continue my work?	Nurse:	Thank you	, doctor. M	ay I continue	my work?
---	--------	-----------	-------------	---------------	----------

Doctor: Of course. Thank you for the helpful discussion

Nurse: You're welcome.

3. With your partner, identify the functional language phrases for making requests. If it is a request, write a possible answer.

For example: <u>Can I ask you something</u>?

Yes, of course you can.

	a request √ not a request ×
a. <u>Can I ask you something</u> ?	✓ Yes, of course you <u>can.</u>
<ul> <li>b. Yes doctor, he ate a salty fish, so it has kept his high blood pressure.</li> </ul>	x
c. Could you lend me a stethoscope?	
d. Would you mind giving me a prescription?	
e. Can you repeat that, please?	
f. May I continue my work?	
g. Thank you for the helpful discussion.	
h. Could you possibly buy this medicine?	
i. Just call me and I will help you.	
j. Will you ask him for me?	

4. Look at the words below and how they are pronounced. Repeat the words together and then practise with your partner.

a.	how	/au/
b.	ate	/et/
C.	condition	/kənˈdɪʃ(ə)n/
d.	fish	/fɪʃ/
e.	sure	/ʃʊə(r)/
f.	prescription	/prɪˈskrɪpʃ(ə)n/
g.	pressure	/ˈprɛʃə/
h.	anesthetist	/əˈniːsθətɪst/

5. Now listen to your teacher pronouncing the words in the conversation below.

Question	Statement	
a. How is her condition?	Her <b>condition</b> will improve soon.	
b. What did the patient eat?	He <b>ate</b> some salty <b>fish.</b>	
c. What will you do?	I will give her a <b>prescription.</b> She will also need a <b>repeat</b> script.	
d. What is his blood <b>pressure?</b>	His blood <b>pressure</b> numbers are 120/80 mm Hg which are considered normal.	
e. Who works in an operating room?	<b>Anesthetists</b> , surgeons, nurses and patients work in an operating room.	

6. Below are some examples of phrases that can be used for making polite requests. Use these to make requests for the situations below. When you have done this, take it in turns to practise making and accepting these requests.

I wonder if you could?	Is there any chance you could?
Could you possibly?	Would you mind +ing?
Do you think you could?	Would it be possible?
Will you?	I need (to) Can you help?
Would you help me with?	Do you mind +ing?

a. Ask a colleague for a favour
b. Ask for directions to a ward
c. Ask someone to open the door for you
d. Ask another nurse to bring you something
e. Ask someone to tell you the time
f. Ask someone to repeat or clarify instructions

## 2.2 Read about Interprofessional Collaboration

- 1. In pairs, discuss the questions below.
  - a. What is collaborative practice in healthcare?
  - b. What important skills are required for good teamwork and/or collaboration?
  - c. What can be difficult about interpersonal collaboration?
- 2. Before reading, draw a line to match the following words with their definitions. After checking with your partner, your teacher will say each word. Repeat each word together.
  - 1. collaboration (n) /kə læbə reıjan/ 2. communication (n) /kə mjuːnə keɪʃən/ 3. interprofessional (n) /In't3: prə'fe[ənəl/ 4. emergency (n) /I'm3:dʒənsI/ 5. suspected (adj) /sə'spektid/ 6. recovery (n) /rɪ'kʌvərɪ/ 7. outcomes (n) /'autknmz/ 8. perspective (n) /pə'spektīv/ 9. comprehensive (adj) / kpmpri'hensiv/ 10. support (n) /sə poət/
- a. to agree with and give encouragement to someone
- b. the process of two or more people or organizations working together
- c. occurring between or involving two or more professionals
- d. complete and include everything that is necessary
- e. a result or effect of an action or situation
- f. a serious, unexpected, and often dangerous situation
- g. transferring information from a person or group to another.
- h. to think about a problem in a wise and reasonable way
- i. thinking possibly exists, is true, will happen,
- j. becoming healthy after an illness or injury <sup>2</sup>

<sup>&</sup>lt;sup>2</sup> Cambridge Dictionary. (2020). Dictionaries. Retrieved from https://dictionary.cambridge.org/dictionary/

3. Read the text quickly and decide what the main idea of the passage is. Then circle the best title from the three choices below and write it in the space provided.

- a. What Are Communication and Team Collaboration?
- b. Barriers to Effective Communication
- c. Known Benefits of Communication and Team Collaboration

Collaboration in health care is defined as health care professionals assuming complementary roles and cooperatively working together, sharing responsibility for problem-solving and making decisions to formulate and carry out plans for patient care. Collaboration between physicians, nurses, and other health care professionals increases team members' awareness of each other's type of knowledge and skills, leading to continued improvement in decision making. Effective teams are characterized by trust, respect, and collaboration. Teamwork is endemic to a system in which all employees are working for the good of a goal, who have a common aim, and who work together to achieve that aim. When considering a teamwork model in health care, an interdisciplinary approach should be applied. Unlike a multidisciplinary approach, in which each team member is responsible only for the activities related to his or her own discipline and formulates separate goals for the patient, an interdisciplinary approach coalesces a joint effort on behalf of the patient with a common goal from all disciplines involved in the care plan. The pooling of specialized services leads to integrated interventions. The plan of care considers the multiple assessments and treatment regimens, and it packages these services to create an individualized care program that best addresses the needs of the patient. The patient finds that communication is easier with the cohesive team, rather than with numerous professionals who do not know what others are doing to manage the patient.3

4. Read the text and then answer the questions on your own. When you have finished, check with a partner.

#### Benefits of Interprofessional Collaboration in Healthcare

Why is interprofessional collaboration essential? Because when you create a collaborative culture (and put communication strategies and technology in place to support that culture), you improve patient care and outcomes. For example, a patient walks into the emergency department (ED) complaining of chest pains. An ED doctor checks him out, followed by a cardiologist, who orders some tests and waits on the results from the radiologist, who confirms what both doctors suspected: the patient is having a heart attack. After having emergency surgery, the patient spends a day in the ICU, where a team of nurses' care for him in 12-hour shifts, before transferring him to a cardiac unit, where he meets his new team of rotating nurses. Each morning throughout his stay, a medical professional (or perhaps his primary care doctor) stops by during rounds. So does the cardiologist, and since the patient has diabetes and chronic obstructive pulmonary disease, an endocrinologist and pulmonologist. Depending on the patient's recovery and lifestyle, physical therapists, dieticians, and social workers might also get involved.

Each of medical professionals has a unique perspective and valuable insights about the patient. They notice different symptoms and consider different possibilities. Together, they have a more comprehensive, holistic view of the patient. But these people are rarely, if ever, in the same room. At best, they share data via electronic health record (EHR), but they often lack a way to communicate directly in real-time. Along with care team meetings, many hospitals now encourage team-based, patient-centered rounds that include the primary doctor, bedside nurse, specialized physicians, and any other relevant team members. This helps to foster both patient-centered care and interprofessional collaboration in healthcare. It also helps to have hospital communication technology that lets care teams communicate and collaborate seamlessly and securely on the go or at the point of care — via text, voice, or video. <sup>4</sup>

<sup>&</sup>lt;sup>4</sup>Tiger Connect. (2020). 5 Benefits of Interprofessional Collaboration in Healthcare. Retrieved from https://tigerconnect.com/blog/5-benefits-ofinterprofessional-collaboration-in-healthcare/

- 1. What is interprofessional collaboration?
  - a. when 2 or more professions work together to achieve common goals
  - b. when 2 or more doctors work together to achieve common goals
  - c. when 2 or more nurses work together to achieve common goals
  - d. when 2 or more pharmacists work together to achieve common goals
- 2. Why is interprofessional collaboration essential?
  - a. Because it can improve patient incomes
  - b. Because it can improve patient care and outcomes
  - c. Because it can improve nurses' incomes
  - d. Because it can improve doctors' outcomes
- 3. The following statement is false about Interprofessional collaboration.
  - a. they share data via EHR
  - b. together, they have a more comprehensive, holistic view of the patient
  - c. they often lack a way to communicate directly in real-time
  - d. each only works with his perspective
- 5. Based on the information in the text, decide if the following statements areTrue or False.

a. Interprofessional collaboration is not essential.	т	F
<ul> <li>Patient-centered care includes the primary doctors, nurses, specialized physicians, and any other relevant team members.</li> </ul>	т	F
c. You can't improve patient care and outcomes with interprofessional collaboration.	Т	F
<ul> <li>Each of medical professionals has a unique perspective and valuable insights about the patient.</li> </ul>	т	F

6. In groups of 3 or 4, discuss both the greatest benefits and challenges of collaboration in a health care setting. Share your ideas with the class.

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### 2.3 Vocabulary to Talk about Interprofessional Collaboration

1. In pairs, write down as many words as you can about the topic of interprofessional collaboration. Remember to write the part of speech of each word (noun, verb, adjective and adverb). Do this without using a dictionary.

θ

4

4

4



INTERPROFESSIONAL COLLABORATION (brainstormed vocabulary)				

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2. Listen to your teacher say each of these words and repeat after your teacher.

Listen for and identify the stressed syllable. Without a dictionary, write the part of speech after each word (n., v., adj., adv.).

• • a. patient	(n)	b. social workers
c. nurse		d. dentist
e. doctor		f. speech therapist
g. family		h. neurologist
i. physiotherapist		j. administrative staff
k. occupational therapist		I. nutritionist
m. pharmacist		n. surgeon
o. midwife		p. analyst
q. anesthetist		r. radiologist

If you are still unsure of the pronunciation, look up the phonetic script in your dictionary and check with your teacher. 3. Listed below is a range of professionals who work in health care and who maybe required to collaborate with each other. Match the professional with their key role and responsibilities.

physiotherapist	analyst	neurologist	radiologist
nutritionist	social workers	occupational therapist	anesthetist
pharmacist	dentist	surgeon	midwife
	nurse	speech therapist	

- a. A... *nutritionist* ... is a person who gives advice on how food affects your health.
- A..... is a person who specialize in diagnosing and treating injuries and diseases using medical imaging procedures such as X-rays.
- c. A..... is a person who studies or examines data in detail.
- d. A..... is a person who prepares and gives out medicines in a hospital or shop.
- e. A..... is a person who helps people who have speech problems.
- f. A..... is a person who gives anesthesia during an operation.
- g. A..... is a person who treats patients using physical therapy and physical rehabilitation
- h. A..... is a person who studies and treats diseases of the nerves
- i. A..... is a person whose job is to care for people who are ill or injured, especially in a hospital.
- j. A.....is a person who treats people's teeth and helps with their patient's oral hygiene.
- k. A..... is a person who is trained to help women when they are giving birth.

- I. A..... is a person who *works with* vulnerable children and supports families in need of assistance.
- m. A..... is a person who is trained to perform medical operations.
- n. A..... is a person who *t*reats injured, ill, or disabled patients through the therapeutic use of everyday activities.
- 4. From the above exercises, choose 8 words and use them in a sentence to demonstrate their meaning. The first one has been done for you.
  - a. For more information about clinical care of COVID-19 patients, see the WHO's full guidance.

C.	
e.	
f.	
h.	
i.	

5. In pairs or small groups, each choose 5 job roles from this lesson. Describe or give a definition for the job role without using it. Try to <u>use your own words</u>, not the definitions included in exercise 3. Your partner will try to guess what your word is.

For example, start your sentence with

- a. This person usually.....
- b. This person is responsible for...
- c. This person's role is to....

## 2.4 Writing an Opinion

- 1. In groups, discuss the following questions
  - a. What reasons might there be for a caesarean section delivery?
  - b. Why would interprofessional collaboration be important for caesarean sections?
- 2. Below is some vocabulary related to Caesarean sections. With a partner, discuss their meaning.

Words	Pronunciation	Meaning in Bahasa
1. incision (n)	/ ɪnˈsɪʒ ən /	
2. to deliver (v)	/dɪ'lɪvə/	
3. pregnant (adj)	/'pregnənt/	
4. uterus (n)	/ ˈyu tər əs /	
5. abdomen (n)	/ˈæb də mən/	
6. costly (adj)	/ˈkɒst.li/	
7. rights (n)	/'raɪts/	
8. medical necessity (n)	/nɪˈsesətɪ/	
9. trend (n)	/'trend/	
10. to estimate (v)	/ˈes.tɪ.meɪt/	

- 3. Read the text and then discuss your understanding of Caesarean sections and the issues raised in the article with a partner. Discuss the following prompts ....
  - a. What is the current trend in Indonesia?
  - b. Can anyone have a C-section?
  - c. What recommendations does the WHO make?

#### **C-Section: Procedure & Recovery**

A C-section, or Caesarean section (also spelled Cesarean section), is a type of surgery used to deliver a baby. The baby is surgically removed through an incision in the mother's abdomen and then a second incision in the uterus.

In Indonesia, C-sections are starting to make the jump from a medical necessity to a preferred delivery method for many pregnant women. The trend has grown, especially in order for the babies to be born on dates that are considered lucky or special. According to the government, C-sections are performed in about 15.3 percent of all births in Indonesia. The trend is regional as well. A survey of nine hospitals around Southeast Asia found that 27 percent of all births were done through C-section.

C-sections however are a costly option. In public hospitals, patients have to pay Rp 8-15 million (\$600-1,100 USD). Furthermore, in private hospitals, the 'VIP class' option can cost more than Rp 50 million (\$3,700 USD). "There's a rise in the demand for C-sections. I noticed because I have a lot of patients using BPJS," said Deddy. "Now that patients from the middle and lower class have access to C-sections, they want to try out the option. They now have the same rights, especially in public hospitals. It's all free."

The World Health Organization has said that national C-section rates shouldn't go above 10-15 percent. It estimated that there are 3.18 million C-sections worldwide because of medical reasons, and almost twice as many, 6.20 million, are C-sections by choice. According to the WHO, countries with more than 15 percent or higher rates of C-sections are categorized as "overused," which means most Southeast Asian countries now fall into this category.<sup>5</sup>

<sup>&</sup>lt;sup>5</sup> Nierenberg, C. (2017, June 17). C-Section: Procedure & Recovery. Live Science. Retrieved https://www.livescience.com/44726-c-section.html

4. Consider the following question and discuss in small groups.

## 'Do you believe Caesarean sections should only be done when medically necessary OR do you think women should have the right to choose this option?'

To introduce your opinion, you can use phrases such as ...

- a. In my opinion, I believe.....
- b. From my point of view,...
- c. As far as I am concerned, ...
- d. Personally, my opinion is that ...
- 5. After your discussion, write a short summary below. Use the opinion expressions above as well as vocabulary from Exercise 2. Remember to give a reason for your opinion. (100-150 words)

6. You are starting a new job as a nurse in a maternity unit in a hospital and you want to support both mother and her new baby as best you can.

In pairs, discuss your opinions and make some notes below.

a. What would be important when supporting a new mother who has just had a C-section?

b. What other parties would you collaborate or have to work with in this room?

c. What preparations might you be responsible for in a maternity ward?

7. What are your expectations of working as a nurse in a maternity ward in a hospital?

Share your opinions as a class. Start your sentence with one of the opinion phrases from Exercise 3. You can also use 'I would say that ... ' or 'Speaking personally, I believe....'

After your class discussion, consider whether your expectations were the same or different from your peers.

#### Module 2

# Anatomy and Physiology of the Human Body English for Nursing 1



## 3.1 Vocabulary to Talk about Parts of the Human Body

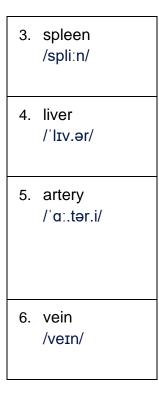
1. On your own and without your dictionaries, write down 25 words about the parts of the human body. Once you are done, discuss your words with a partner.

2. Look at the list below. Did you include these parts of the body? Do you know the location and function of each part? Discuss. If you are unsure, check your dictionaries.

heart	lungs	spleen
liver	artery	vein
pancreas	bone	muscle
brain	nerves	abdomen

3. Listen carefully to your teacher say each word and then repeat. Next, match the vocabulary for parts of the human body with their correct definition. Work on your own and then check your answers with your partner.

Vocabulary	Meaning
1. heart (n) /hɑːt/	a. a large lobed glandular organ in the abdomen, involved in many metabolic processes
2. lungs /lʌŋ/	<ul> <li>a hollow muscular organ that pumps the blood through the circulatory system by rhythmic contraction and dilation</li> </ul>

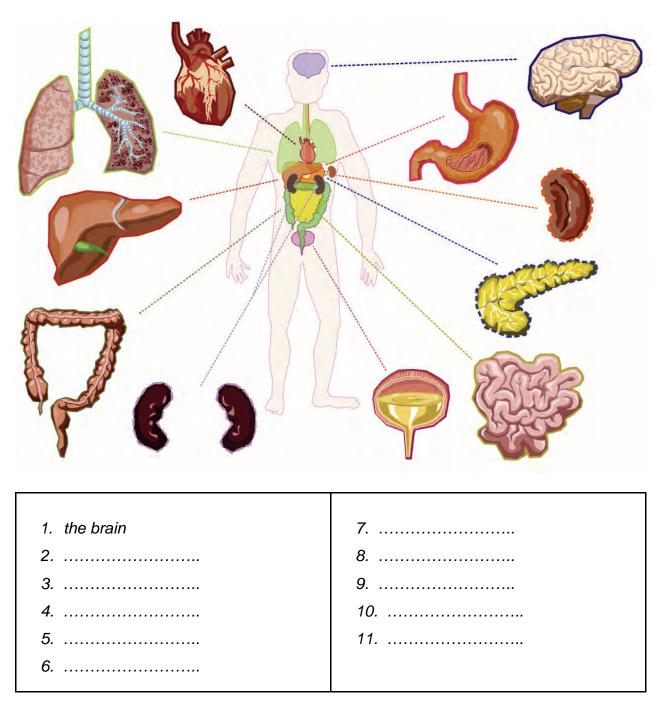


	Vocabulary
1.	pancreas /ˈpæŋ.kri.əs/
2.	bone /bəʊn/
3.	muscle /ˈmʌs.əl/
4.	brain /breɪn/
5.	nerves /nsrvz/
6.	abdomen /ˈæb.də.mən/

- c. any of the tubes forming part of the blood circulation system of the body, carrying in most cases oxygen-depleted blood toward the heart
- d. an abdominal organ involved in the production and removal of blood cells forming part of the immune system
- e. each of the pair of organs situated within the rib cage, consisting of elastic sacs with branching passages into which air is drawn, so that oxygen can pass into the blood and carbon dioxide be removed
- f. any of the muscular-walled tubes forming part of the circulation system by which blood is conveyed from the heart to all parts of the body

	Meaning
a.	(in the body) a whitish fiber or bundle of fibers that transmits impulses of sensation to the brain or spinal cord, and impulses from these to the muscles and organs
b.	the part of the body containing the digestive organs
C.	a band or bundle of fibrous tissue in a human that has the ability to contract, producing movement in or maintaining the position of parts of the body
d.	a large gland behind the stomach which secretes digestive enzymes.
e.	any of the pieces of hard whitish tissue making up the skeleton in humans
f.	an organ of soft nervous tissue contained in the skull, functioning as the coordinating center of sensation and intellectual and nervous activity

4. Below is an image of the human body. With your partner, can you identify the 11 parts of the body?



5. Test your knowledge by matching the vocabulary with the meanings below. Check your answers in pairs.

1. a large lobed glandular organ in the abdomen	a. heart
2. organ that pumps the blood	b. bone
<ol> <li>an organ of soft nervous tissue contained in the skull</li> </ol>	c. liver
4. digestive organs; the belly	d. brain
5. the pair of organs situated within the rib cage	e. abdomen
6. the pieces of hard whitish tissue	f. lungs

## **3.2 Language for Talking about Allergies**

- 1. With another student, discuss the following prompts
  - a. Have you ever experienced an allergic reaction?
  - b. What causes allergic reactions?
- 2. Match the common questions and their answers about allergies and allergic reactions below. Was any information surprising? Discuss with your group.
- 1. Do you think all allergies are harmless?
- 2. What are some of the common symptoms of an allergic reaction?
- Most people believe peanuts are one of the most common triggers for reactions. Is this true?
- Tree nuts can commonly cause an allergic reaction. What are some examples of tree nuts?
- 5. Can doctors cure food allergies?
- Can someone get anaphylaxis reaction just from touching food?
- 7. Who are allergies more common in -children or adults?

- a. There is no cure for food allergies. The only prevention is to avoid the food.
- b. The top nine allergens that trigger 90% of food allergies are peanuts, eggs, cow's milk, tree nuts, fish, shellfish, soy, sesame and wheat.
- Yes, food allergies are much more common in infants aged 12 months and 2 than adults.
- d. Some of the signs of an allergic reaction are vomiting, swelling around the mouth, red and itchy skin, difficulty breathing, sneezing and/or watery eyes.
- e. Tree nuts include pistachios, macadamias, walnuts, brazil nuts, almonds and hazelnuts.
- f. Allergies are certainly not harmless. Some allergies can lead to anaphylaxis and are potentially life threatening.
- g. It is rare that touching a food causes a life-threatening reaction, but contact should still be avoided.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Allergy & Anaphylaxis Australia. (2020). The allergy awareness quiz. Retrieved from https://allergyfacts.org.au/resources

3. Read the following conversation between friends Alice and Sam.

What is Alice allergic to? What are some of her symptoms?

Alice:	Ahhchooo!
Sam:	You've been sneezing a lot lately. Are you sick or something?
Alice:	No. Every rainy season, I'm stricken with allergies.
Sam:	Oh really? I've never had any seasonal allergies.
Alice:	Consider yourself lucky.
Sam:	What are all the symptoms?
Alice:	Well, as you just saw, I sneeze a lot. Also, my nose becomes very runny, my throat sometimes itches and my eyes start to water.
Sam:	That doesn't sound good.
Sam: Alice:	That doesn't sound good. No it's not. So, you don't have any type of allergies?
	-
Alice:	No it's not. So, you don't have any type of allergies?
Alice: Sam:	No it's not. So, you don't have any type of allergies? Well, I have a severe allergy to seafood. It runs in the family.
Alice: Sam: Alice:	No it's not. So, you don't have any type of allergies? Well, I have a severe allergy to seafood. It runs in the family. Everyone to some extent is allergic to seafood, aren't they? Well, I get it pretty bad. My whole face turns red, including my ears. My

4. Listen to your teacher pronounce the following words. Repeat after your teacher. Practise again with your partner and add another word below with the same sound.

/u:/	you	soon
/e/	well	
/aʊ/	now	
/ai/	fine	
/0/	thanks	
/eɪ/	great	

5. Listen to your instructor pronouncing the words in the conversation below and repeat. What do you notice about the intonation?

Questions	Statements
1. Are you sick?	a. I have a fever.
2. What's wrong with you?	b. I am sneezing.
3. Is she sick?	c. She often gets headaches.
4. Is he sick?	d. He is not very healthy.

6. Use words below to complete the dialogue between a doctor and a patient.



a. problem	b. unwell	c. you	d. now
e. symptoms	f. swollen	g. see	h. allergies

Doctor	Good afternoon. How are? What seems to be the?
Patient	I'm feelingI. I ate some seafood for lunch and I have
	tingling in my mouth and my lips feel
Doctor	How long have you had these?
Patient	Oh, I have been feeling ill for about 2 hours.
Doctor	Do you often eat seafood? Do usually get these symptoms
	when you eat seafood?
Patient	Sometimes, but it depends on what I eat.
Doctor	Do you have any other?
Patient	Not that I'm aware of.
Doctor:	Do you also feel dizzy? Or is your tongue swollen too?
Patient	Not that I know of.
Doctor:	

7. Read the dialogue again. What questions were asked to find out more information from the patient?

With your partner, choose a common allergy. Write a short dialogue between 2 people discussing allergies or an allergic reaction.

This should involve 1 person asking questions to find out information.

What symptoms do you....?

How long have you...?

How often do you...?

Do you usually....? Do you feel...? Do you have any other...?

Is it common for you to....?

## **3.3 Grammar for Past Simple and Past Continuous**

1. There are three different ways to pronounce the 'ed' ending of regular verbs in the simple past tense: / Id /, / t / or / d /.

Read through the explanation below with your partner and practise the example past tense verbs together.

-ed sounds like 't'	-ed sounds like 'd'	-ed sounds like 'id'
When a verb ends in a voiceless sound, the – ed ending sounds like "t".	When a verb ends in a voiced sound, the –ed ending sounds like "d".	When a verb ends in a "t" or "d" sound already, the –ed ending sounds like "id" or "ud".
A voiceless sound is when your vocal chords don't vibrate.	A voiced sound means your vocal chords vibrate.	
Voiceless consonant sounds	Voiced consonant sounds	
p, f, k, s, sh, ch, th	b, v, g, z, j, th, l, m, n, r	
	All vowel sounds are voiced.	
worked	moved	started
dropped	returned	visited <sup>3</sup>

#### Past Tense Pronunciation for Regular Verbs (-ed)

<sup>3</sup> Stonebrink, D. (2010). Past Tense Pronunciation for Regular Verbs Retrieved from http://www2.estrellamountain.edu/faculty/stonebrink/Esl021

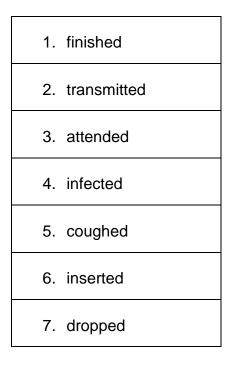
2. The past tense verbs below are commonly used in a hospital environment.

Working with a partner, decide how the -ed ending is pronounced. Check your answers with another pair and ask your teacher if you are unsure.

finished	stayed	engaged	stopped	transmitted
studied	coughed	watched	worsened	attended
wiped	dissolved	infected	leaked	inserted

-ed sounds like 'd'	-ed sounds like 'id'
	-ed sounds like 'd'

3. Match the verbs to their phonemic transcription. Check the -ed endings and practice with your partner.



a.	/ɪnˈfɛktɪd/
b.	/drɒpt/
C.	/ˈfɪn.ɪʃt/
d.	/əˈtɛndɪd/
e.	/kpft/
f.	/trænzˈmɪtɪd/
g.	/ɪnˈsɜːtɪd/

4. Review your understanding of the Past Simple and Past Continuous.

The past simple and past continuous tenses are used to talk about the past

#### Past simple

We use the **past simple** to describe a situation (an action, an event or a state) which was true, or which happened at a particular time in the past. It describes a situation which is not happening or not true now.

I checked Salam just before handover.

(= this action is now finished)

I had chemotherapy in 1998.

(= the patient had chemo more in that year, but it is finished now) He **was** in guite a lot of pain when he first arrived.

(= it was true at that particular time; perhaps it is not true now)

+ statement	He need <b>ed</b> an X-ray.
- statement	I did not need an X-ray
? question	Did he need an X-ray?

#### **Past Continuous**

We use the **past continuous** to talk about a past activity that was in progress at a particular time in the past:

At 8 am, I was eating breakfast.

`Where were you last night?' `I was sleeping.'

We use the **past simple** and **past continuous together** to talk about a completed past event that happened when another activity was in progress.

It started to rain while I was walking in the park.

I was watching TV when the phone rang.

What were you doing when he arrived?

These sentences are often joined with while, when or as.

- 5. Complete the sentences using the correct form of the past continuous. Check your answers together with a partner.
  - a. Joanne ...... (make) a phone call to a patient when Cristina arrived at work.
  - b. While he..... (sterilize) the tubes, he ran out of sanitizer.
  - c. They decided to go for a walk in the hospital gardens while the sun

..... (still/shine)

d. I called the doctot this morning, but he didn't answer the phone.

..... (He/see) another patient?

e. At 10pm last night, Manny..... (not/sleep).

He..... (talk) to his sister on the phone.

f. John had a car accident while he..... (drive) to work. He

..... talk) on his mobile when he crashed into another car.

6. You are going to interview your partner. Ask your partner what he or she was doing at the specific times mentioned. Swap roles so you are both asking and answering questions.

8am this morning	9:30 am yesterday	12 noon yesterday	3pm on Tuesday
5:30pm last night	7pm last night	10 pm on Saturday	12 midnight

Example: What were you doing at 8am yesterday?

I was eating breakfast while I was getting ready for work.

Anatomy and Physiology of the Human Body

## **3.4 Read about Alternative Treatments for Depression**

- 1. With a partner, discuss the following questions.
  - a. What are the symptoms of depression?
  - b. What are treatments for depression?
  - c. What advice would you give a friend who is suffering from depression?
- 2. Read the introduction to a text on alternative treatments for depression. Which treatments that you discussed with your partner are mentioned in the text?

#### **Depression: Alternative Therapies**

Alternative therapy for depression encompasses a variety of disciplines that includes everything from diet and exercise to mental conditioning and lifestyle changes.

A health treatment that is not classified as standard Western medical practice is referred to as "alternative," or "complementary" or "integrative." Integrative therapy encompasses a variety of disciplines that includes everything from diet and exercise to mental conditioning and lifestyle changes. Examples of integrative therapies include acupuncture, guided imagery, chiropractic treatments, yoga, hypnosis, biofeedback, aromatherapy, relaxation, herbal remedies, massage and many others.

There is some evidence that holistic treatment is effective for depression. Using holistic psychotherapies can help patients go back to the source of the depression in their lives and learn effective ways of using tools to manage the symptoms and in many cases improve their overall functioning.<sup>4</sup>

3. Listen to your teacher and pronounce the following words.

alternative	/ vlˈtɜː.nə.tɪv /	acupuncture	/ˈakjʊˌpʌŋ(k)tʃə/
holistic	/həˈlɪs.tɪk /	yoga	/ˈjəʊɡə/
therapy	/ˈθer.ə.pi /	chiropractic	/ˌkʌɪrə(ʊ)ˈpraktɪk/
relaxation	/riːlakˈseɪʃ(ə)n/	massage	/ˈmasɑː(d)ʒ,məˈsɑː(d)ʒ/
integrative	/ˈɪntɪɡrətɪv/	complementary	/kɒmplɪˈmɛnt(ə)ri/

4. Match the words on the left to the correct definition on the right.

1. alternative (adj)	a.	a treatment that helps someone feel better, grow stronger, especially after an illness
2. holistic (adj)	b.	the rubbing and kneading of muscles and joints of the body with the hands, especially to relieve tension or pain
3. therapy (n)	C.	dealing with or treating the whole of something or someone and not just a part
4. relaxation (n)	d.	a thing that you can choose to do or have out of two or more possibilities
5. acupuncture (n)	e.	based on the diagnosis and manipulative treatment of the joints which are believed to cause other disorders by affecting the nerves, muscles, and organs
6. yoga (n)	f.	the state of being free from tension and anxiety
7. chiropractic (n)	g.	originating in India, this practice including breath control, meditation and body postures, and is widely practised for health and relaxation
8. massage (v, n)	h.	a system in which fine needles are inserted in the skin at specific points which is used in the treatment of various physical and mental conditions

•

- 5. Re-read the introduction. Highlight the words learned in the previous activity and answer the questions below.
  - a. An alternative therapy is not classified as which standard medical practice?
  - b. What two synonyms for alternative are used in the text?
  - c. How are holistic treatments effective for depression?
- 6. Read the rest of the text and discuss these questions with a partner
  - a. What is integrative therapy?
  - b. What are some integrative therapies used to treat depression?
  - c. Herbal remedies

Before recommending any substance to treat reported depression or mood imbalance, providers will take detailed medical history to look for biochemical causes that may contribute to mood imbalance. The blood tests may check levels of certain substances, such as Vitamin D and folate, which may play a role in mood imbalance.

Of the wide variety of available herbal therapies, St. John's wort and ginkgo biloba are the products most often used for treating depression.

St. John's wort has been used for medical purposes in other parts of the world for thousands of years, despite the fact that it has not been scientifically proven to treat moderate to severe depression. Ginkgo biloba is thought to improve memory and other intellectual functions, although the evidence is not consistent.

Any herbal supplement requires caution and should be taken only after consulting your doctor. Your doctor can help you weigh the risks and potential benefits so you can make an informed decision.

#### Acupuncture

Acupuncture is an ancient Chinese method of healing that prevents and cures specific diseases and conditions by sticking very fine, solid needles into specific points on the body. Acupuncture stimulates the body's ability to resist or overcome illness by correcting imbalances. It also prompts the body to produce chemicals that decrease or eliminate painful sensations.

In a recent clinical study, acupuncture has been shown effective in decreasing depression at three months, compared to usual care. For people who suffer from both pain and depression, acupuncture is better than counselling and standard of care at reducing both symptoms. Acupuncture is highly effective at treating pain, such as headaches; menstrual cramps; and low back, neck, or muscle pain. It also can be used to treat menopausal symptoms, allergy symptoms, and side effects due to radiation and chemotherapy.

#### Massage

Massage uses touch to promote relaxation while decreasing tension and stress. The release of serotonin and dopamine, and the decrease of cortisol during a massage may help improve the symptoms of depression, lessen pain and improve sleep. Massage supports the mind-body connection, allowing for a better awareness of what is happening in our bodies. Some variations of massage that can support the mind-body connection and general relaxation are Swedish massage techniques, Reiki, aromatherapy, and craniosacral therapies.

#### Guided imagery and relaxation

Guided imagery is a form of focused relaxation that helps create harmony between the mind and body. Guided imagery coaches you in creating calm, peaceful images in your mind—a "mental escape" for therapeutic purposes. It can be a powerful psychological strategy to enhance a person's coping skills. It can help people cope with—and possibly overcome—stress, anger, pain, depression, and insomnia with or without associated physical illness.

#### Yoga

Yoga "meets you where you are," even when you are depressed. Practicing yoga teaches you breathing techniques that can help to energize you when you are feeling down or to help calm you at the times you may be feeling anxiety. The breath is the link between your mind and your body. Changing your breath can help you feel better mentally and physically. The postures and movements in yoga teach you how to hold your body in a way that can make you feel stronger, better able to breathe and function, and to create an improved sense of overall well-being.<sup>5</sup>

7. According to the information in the article, are the following statements True or False? Circle T or F next to the statements below.

a.	Herbal remedies may contribute to mood imbalance.	Т	F
b.	St John's wort has been widely used for medical purposes historically.	т	F
C.	Consulting a doctor before taking a herbal remedy is		
	unnecessary.	т	F
d.	Acupuncture is a better treatment for pain and depression		
	symptoms than counselling and standard care.	Т	F
e.	Acupuncture is ineffective in treating the side effects of		
	radiation and chemotherapy.	Т	F
f.	The increase in cortisol levels during a massage improves the		
	symptoms of depression.	Т	F
g.	Guided imagery is a strategy that can help improve sleep.	т	F
h.	People with anxiety cannot practice yoga.	т	F

#### 8. Write a dialogue with a partner based on the following situation.

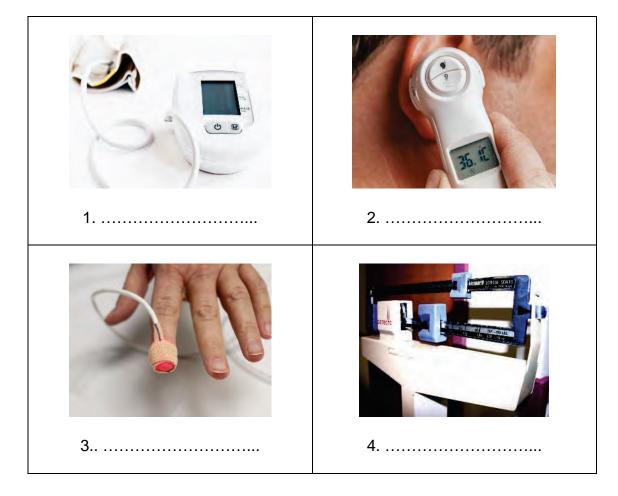
You are having a conversation with a friend who you know has depression. He/she has seen a doctor and had blood tests, but also wants to find out other things that people do to reduce the symptoms. He/she asks you what you know about alternative therapies, trusting you because you are a nurse. In the dialogue describe two alternative therapies and how they can be useful for treating depression and other conditions.

You:	Hi How are you feeling at the moment?
Friend:	Ohok, I suppose. I saw the doctor like you suggested and told her I've been depressed. We talked about taking medication and counselling, and she did some blood tests.
You:	That's good. When will you get the results?
Friend:	In a day or so. Hey I was wondering I don't know if I want to take medication or see a psychologist yet. What can you tell me about other treatments?
You:	Well,
Friend:	
You:	
Friend:	
You:	
Friend:	
You:	

## 4.1 Language for Assessing a Patient's Condition

1. Match the equipment to the picture.

digital thermometer	blood pressure cuff and monitor
scales	pulse oximeter



2. Match the equipment with the correct function.

1. blood pressure cuff	a. weigh a patient
2. blood pressure monitor	b. records blood oxygen saturation
3. digital thermometer	c. wraps around a patient's arm to take blood pressure
4. pulse oximeter	d. takes a patient's blood pressure
5. scales	e. takes a patient's temperature

3. Listen to your teacher pronounce these words and repeat.

cuff	/kʌf/	monitor	/ˈmɒnɪtə/
thermometer	/θəˈmɒmɪtə/	pulse	/pʌls/
oximeter	/ɒkˈsɪmɪtə/	scales	/skeɪlz/

4. Quickly read the following dialogue between a nurse and patient.

Which of the equipment from the previous activity did the nurse use to check the patient's condition?

Nurse:	Hello, Mrs Yulia. I'm Dewi. I'm on duty tonight and I'll be taking care of you. How have you been feeling?
Patient:	Well, I have a sore throat and difficulty breathing. Could you give me some medicine?
Nurse:	Of course, but first I'll need to assess your condition. Is that ok?
Patient:	Sure.
Nurse:	First, I'll take your blood pressure. Can you put your arm out straight so I can put the blood pressure cuff on, please?
Patient:	OK (patient straightens arm, nurse adjusts cuff and looks at monitor)

- Nurse: (Machine beeps and the nurse records information on the chart). That's done. Now, can you hold out your hand? I'm going to clip this lead onto your finger.
- Patient: (Holds out hand) What's that for?
- Nurse: This will give me a reading of your oxygen saturation.
- Patient: So, how's it looking, nurse?
- Nurse: Well, your blood pressure and oxygen saturation are normal, but your respiratory rate is 26 times per minute.
- Patient: What does that mean?
- Nurse: It's faster than normal which means that a doctor will need to come and check you out. Then we can give you the right medication to bring that down.
- Patient: Ok, when can I get the medication?
- Nurse: After the doctor's seen you. Don't worry, it won't be long.
- Patient: Thanks for your help.
- Nurse: My pleasure. Don't forget, if you need anything, just press the call button.
- Patient: Yes, sure.

#### 5. Answer the following questions.

- a. What symptoms does the patient have?
- b. What does the nurse check?
- c. Which readings are normal?
- d. Why does the doctor need to check the patient's condition?

#### 6. Re-read the dialogue. Who says the following, Nurse (N) or Patient (P)?

- a. How have you been feeling? (N)
- b. Could you give me some medicine?
- c. Of course.
- d. Is that OK?
- e. Can you put your arm out straight?
- f. Can you hold out your hand?
- g. How's it looking?
- h. What does that mean?
- i. When can I get the medication?
- j. Don't worry, it won't be long.
- k. Thanks for your help.
- I. My pleasure.
- m. If you need anything, just press the call button.
- 7. Which of the expressions above are requests for something and which are reassurances? Complete the table below.

Request	Reassurance
Could you give me some medicine?	Of course.

- 8. Match the statement on the left with the most appropriate response on the right. Practise saying them with a partner.
- 1. How are you feeling right now?
- 2. How long have you been feeling like this?
- 3. Can you give me something for the pain?
- 4. Is the doctor coming soon?
- 5. Can you roll up your sleeve, please?
- 6. What does that mean?
- 7. I'll check in with you again in 30 minutes.
- 8. If you need anything, please use the buzzer.

- a. She'll be here shortly.
- b. An hour or so.
- c. I will. Thank you, nurse.
- d. I'm a little dizzy.
- e. Before I do that, I'll just need to check your condition.
- f. Thanks.
- g. Ok. Like this?
- h. Your blood pressure is a little low.

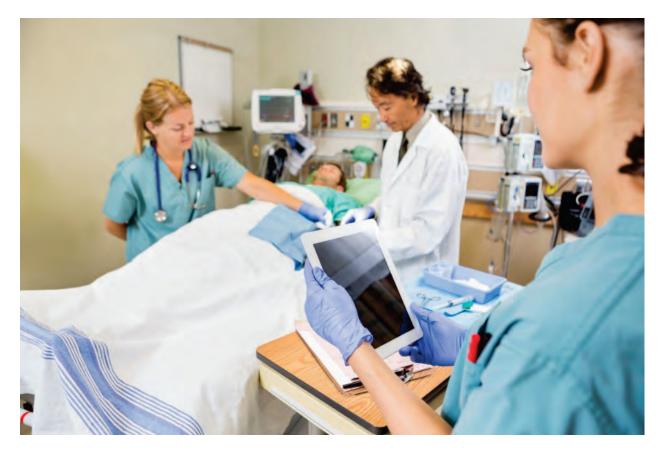
9. With a partner, write a dialogue between a patient and a nurse. The patient has new symptoms and is feeling stressed. The nurse has just commenced duty and introduces herself/himself, asks how the patient is feeling and checks at least two vital signs. The nurse reassures the patient. The first line has been written for you.

Nurse:	Hello, I'm I'm on duty tonight and I'll be taking care of you. How have you been feeling?
Patient:	Well,
Nurse:	
Patient:	



### **4.2 Grammar for the Present Perfect**

1. With a partner, talk about things patients should or should not do before they have surgery. Make a list in the space below.



For example: Don't eat before surgery

Present Perfect Regular Verbs			
We use the present perfect tense to ask questions or to talk about any time in the			
past up to now.			
To make a question			
have/has + pronoun or not	un + evei	r + past participle	
"Have you ever visited a fr	riend in th	ne hospital?"	
<b>To answer a question</b> have/has + never + past participle (negative) have/has + past participle (positive)			
"No, I haven't. I have nev "Yes, I have. I have visite		-	
With regular verbs, to form the p	oast parti	ciple, add –ed to the main verb.	
call <b>→</b>	•	called	
ask 🗲	•	asked	
help 🗲	•	helped	
talk <b>→</b>	•	talked	
walk <b>→</b>	•	walked	
visit <b>→</b>	•	visited	
Present Perfect Irregular Verbs			
Some past participles do not end in –ed. Some past participles are spelled differently in past tense. These past participles are irregular (not regular).			
"Have you ever <b>broken</b> you "Have you ever <b>had</b> surger			
Study the list below.			
be was/were been →	Have y	ou ever <b>been</b> to the hospital?	
break broke broken 🗲	She ha	s never <b>broken</b> her leg.	

cut cut cut 🗲	Have you ever <b>cut</b> your finger?
fall fell fallen 🔸	They have never fallen down the steps.
go went gone 🗲	I haven't <b>gone</b> to the doctor in two weeks.
have had had 🗲	Have you had your appointment yet?
see saw seen →	She hasn't <b>seen</b> the doctor yet.
sit sat sat ➔	Have you ever <b>sat</b> in a doctor's office for a long time?
take took taken 🗲	Have you ever <b>taken</b> medicine?

3. With a partner, choose three of the questions from above to ask your partner. Practice using the present perfect with irregular past participles to ask and answer questions.

Read the following dialogue between Nur and Nurse Aman. Nur has taken her sister to hospital as she needs to have an operation. Nur discusses her sister's medical background with the nurse. Fill the gaps with the correct form of the verb in Present Perfect.

Good morning. I need to ask you questions about your sister's		
condition.		
Has she had (have) any health problems in the past?		
Yes. She has high blood pressure and heart disease. For the past 10		
years she <b>(have)</b> some problems with asthma.		
How many years has she had these problems?		
She (manage) high blood pressure for 20 years		
now.		
Oh ok. When was the last time she saw a doctor about her medication?		
I know she(visit) her doctor recently.		
And has she had any heart attacks or strokes?		
Yes. Since she turned 40, she(suffer) 3 minor heart		
attacks.		
Can you tell me if she had any operations for her heart or any other		
problems?		

Nur:	Yes. She (have) two operations for her heart. She had one		
	bypass surgery in 2000 and one in 2002.		
Nurse:	Has she been in the hospital for anything else?		
Nur:	No. She (have not be) in hospital for any other issues.		
Nurse:	Does she smoke?		
Nur:	No. She smoked before she had a heart attack, but she quit recently.		
Nurse:	That's good to know. Do you know if she has eaten anything today?		
Nur:	Yes. I'm pretty sure she (eat) breakfast already.		

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4. Read the following descriptions of how we use Present Perfect for finding out information about a patient's past.

Г

Present Perfect Questions			
Present Perfect can also be used for asking questions about a patient's biography or medical history.			
We cannot see the present result of this action or experience, but we are interested in it now.			
For example, use	ever and/or before to mean at some time in the past.		
Nurse:	<i>Have you ever had an X-ray before?</i> (= do you have this experience in your medical history?)		
Patient:	Yes, I <b>have.</b>		
Nurse:	Have you ever had asthma before? (= was there a time in the past when you had asthma?)		
Patient:	Yes. I <b>have had</b> asthma all my life. (= I had asthma when I was born and I have asthma now)		

5. Work with a partner. Practice asking and answering questions. Ask follow up questions to find out more information.

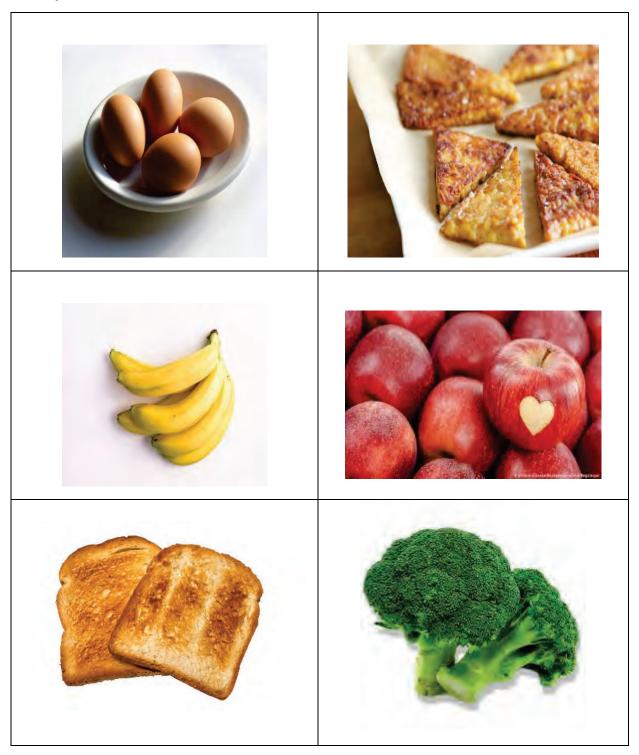
Begin your questions with "Have you ever ... before?"

- a. ....break a bone?
- b. ....help a sick person?
- c. ....sprain your ankle or wrist?
- d. ....go to your GP more than once a year?
- e. ....try alternative health therapy?
- f. ....have an allergic reaction?
- g. ....travel out of your home country?
- h. ....administer medicine in an emergency?



# 4.3 Read about Eating Well

1. Identify the foods below. With a partner, decide if they are a healthy food choice, and why.



2. Scan the text below for understanding. Circle the best title from the three choices below. Write the correct title in the space provided.

.....

- a. The effect of beverages on people.
- b. The impacts of an unbalanced diet
- c. How to lose weight

Nutritionists classify food by groups. They say that the human body requires a balanced mixture of food from all the main food groups: carbohydrates, protein, fats, vitamins, fibre and minerals. The secret of good health is to eat a balanced diet, with the right amount of food, and to take plenty of physical exercise. When there is an imbalance – for example if you eat too little or too much, or when one of the food groups is missing from your diet - this can cause vitamin deficiency, illness, and even death. If there is no treatment and the diet does not change, death is a possibility. One example of this is the problem of obesity – this is when a person is dangerously overweight. Obesity is most common in developed countries. The imbalance comes from eating a diet which is high in fat, sugar and salt, and in not eating enough fruit, vegetables and fibre, and not burning the extra calories through physical exercise. In the case of eating disorders such as anorexia nervosa and bulimia, the imbalance leads to weight loss, when a person eats less than they need. Sufferers are mostly teenage girls – they either starve themselves in order to lose weight, or eat a lot of food at once (binge-eating) and vomit up all the food later. They often end up in hospital, and after emergency life-saving treatment they receive psychiatric help and counselling.<sup>6</sup>

- 3. Choose the correct meaning of the following words based on their use in the text.
  - 1. obesity (n) /əʊˈbiːsəti/
    - a. the state of being very fat, in a way that is not healthy.
    - b. the state of being malnourished.
    - 2. anorexia (n) / ænə reksiə/
      - a. an emotional disorder, especially affecting young women, in which there is an abnormal fear of being fat.
      - b. a short coat with a hood that is worn as protection against rain, wind and cold.
  - 3. bulimia (n) /buˈlɪmiə/, /buˈliːmiə/
    - a. an emotional disorder in which a person repeatedly eats too much and then forces him or herself to vomit.
    - b. an object which out from something in a round shape.
- 4. Based on your information in the text, are the following statements True or False? Circle T or F next to the statements below.

a.	Food is classified by nutritionists into three groups.	Т	F
b.	Eating too much of some types of food can lead to	Т	F
C.	health issues.		
d.	Anorexia and bulimia lead to weight loss.	Т	F
e.	The secret of good health is to eat healthy foods.	Т	F
f.	Obesity is most common in developing countries.	Т	F

- 5. Answer these questions below in the space provided.
  a. What combination of foods do people need for a balanced diet?
  b. What are the 2 key factors in maintaining good health?
  c. What are 3 possible outcomes of an unbalanced diet?
  d. What are 3 types of food we should be eating a lot of?
  e. What are 3 types of food we should limit in our diets?

.....

6. Match the meanings of the words below as the words are used in the text.

1. mixture	<ul> <li>a. something that is done to cure an illness or injury, or to make somebody look and feel good</li> </ul>
2. imbalance	b. a person who suffers from a disease
3. overweight	c. a combination of different things
4. treatment	d. too heavy in a way that may be unhealthy
5. sufferer	<ul> <li>a situation in which two or more things are not the same size or are not treated the same in a way</li> </ul>
	f. that is unfair or causes problems

7. Work with a partner to categorise the foods listed under the table into the correct food group. Note some of the options may be dairy, but also contain a lot of sugar and fat. This food should appear in 2 columns. An example is shown below.

Grains	Vegetables	Fruits	Dairy	Protein	Sugars, fat, salt
			ice cream		ice cream

avocado	lemonade	muffin muesli	wholemeal bagel	smoothie
peanut butter	milk	chocolate bar	zucchini	grapes
i <del>ce cream</del>	pasta	pumpkin	cabbage	brown rice
broccoli	oats	cheese	mayonnaise	cream cheese
croissant	eggs	watermelon	canned tuna	avocado
steak	apple	baked beans	tofu curry	lamb kebab

Anatomy and Physiology of the Human Body

# 4.4 Vocabulary to Talk about the Circulatory System

1. With a partner, complete the following facts about the heart with the most appropriate answer from the box below.

fastest	1893	115,000	smallest	1958
7,200	3,500	a minute	100,000	Monday

- a. Your heart will beat about \_\_\_\_\_\_ times each day.
- b. Your heart pumps about \_\_\_\_\_\_ litres of blood every day.
- c. The first open-heart surgery occurred in the USA in \_\_\_\_\_.
- d. The first implantable pacemaker was used in \_\_\_\_\_.
- e. The youngest person to receive heart surgery was \_\_\_\_\_\_ old.
- f. The earliest known case of heart disease was identified in the remains of a \_\_\_\_\_\_-year-old Egyptian mummy.
- g. The fairy fly, which is a kind of wasp, has the \_\_\_\_\_ heart of any living creature.
- h. The American pygmy shrew is the smallest mammal, but it has the \_\_\_\_\_\_ heartbeat at 1,200 beats per minute.
- i. Most heart attacks happen on \_\_\_\_\_.
- j. If you were to stretch out your blood vessel system, it would extend over kilometres.<sup>7</sup>

2. Match the word on the left with the correct pronunciation on the right. Listen to your teacher pronounce the words and repeat.

1.	capillary		
2.	vein		
3.	mitral		
4.	circulation		
5.	tricuspid		
6.	atrium		
7.	artery		
8.	aorta, aortic		
9.	ventricle		
10	). septum		
11.pulmonary			
12	12.valve		

a. /səːkjʊˈleɪʃ(ə)n/
b. /ˈeɪtrɪəm/
c. /kəˈpɪləri/
d. /veɪn/
e. /ˈmʌɪtr(ə)l/
f. /trʌɪˈkʌspɪd/
g. /eɪˈɔːtə/ /eɪˈɔːtɪk/
h. /ˈaːtəri/
i. /ˈsɛptəm/
j. /valv/
k. /ˈvɛntrɪk(ə)l/
l. /ˈpʌlmən(ə)ri/

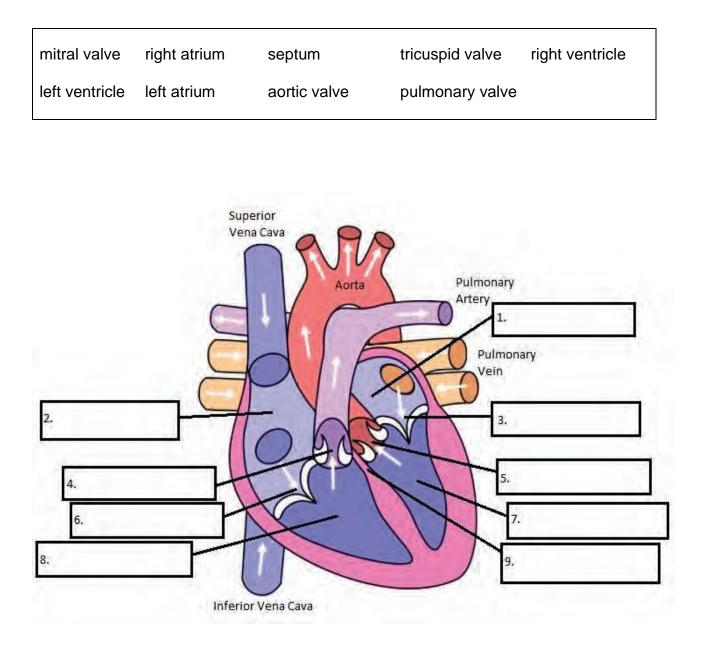
3. Match the anatomical feature of the heart on the left with its correct meaning on the right.

1. aorta	a. a partition separating two chambers of the heart
2. atrium (pl. atria)	<ul> <li>b. the continuous motion by which the blood travels through all parts of the body under the action of the heart.</li> </ul>
3. artery	<ul> <li>c. the main artery of the body, supplying oxygenated blood to the circulatory system. In humans it passes over the heart from the left ventricle and runs down in front of the backbone.</li> </ul>
4. capillary	<ul> <li>any of the tubes forming part of the blood circulation system of the body, carrying in most cases oxygen-depleted blood towards the heart.</li> </ul>
5. septum	e. any of the fine branching blood vessels that form a network between the arterioles and venules.
6. valve	<ul> <li>f. any of the muscular-walled tubes forming part of the circulation system by which blood is conveyed from the heart to all parts of the body</li> </ul>
7. vein	g. the valve between the left atrium and the left ventricle of the heart, which has two tapered cusps.
8. ventricle	<ul> <li>h. each of the two upper cavities of the heart from which blood is passed to the ventricles. The right atrium receives deoxygenated blood from the veins of the body, the left atrium oxygenated blood from the pulmonary vein.</li> </ul>
9. mitral (valve)	<ul> <li>a membranous fold in a hollow organ, such as a blood vessel which maintains the flow of the contents in one direction by closing in response to any pressure from reverse flow.</li> </ul>

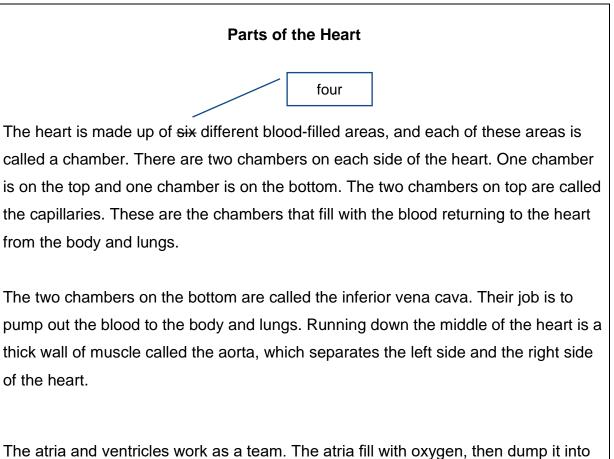
- 10. tricuspid (valve)
- 11. pulmonary (valve)
- 12. aortic (valve)
- 13. circulation

- j. denoting or relating to a valve formed of three triangular segments, particularly that between the right atrium and ventricle of the heart.
- k. a hollow part or cavity in an organ; each of the two main chambers of the heart, left and right.
- I. the semilunar valve between the left ventricle and the aorta.
- m. the semilunar value of the heart that lies between the right ventricle and the pulmonary artery and has three cusps

4. In pairs, match the names of heart parts with their location.



5. Read the text below 'Parts of the Heart'. Find 8 mistakes and correct them. The first one has been done for you. Check your answers with a partner.



the ventricles. The ventricles then squeeze, pumping blood out of the heart. While the ventricles are squeezing, the atria refill and get ready for the next contraction. So when the blood gets pumped, how does it know which way to go?

Well, your blood relies on four special veins inside the heart. Two of the heart valves are the tricuspid valve and the aortic valve. They let blood flow from the atria to the ventricles. The other two are called the mitral valve and pulmonary valve, and they're in charge of controlling the flow as the blood leaves the heart. These valves all work to keep the blood flowing forward. They open up to let the blood move ahead, then they close quickly to keep the blood from flowing backward.<sup>8</sup>

6. Read the text below 'How blood circulates' and fill in the gaps with words from the box below (NOTE: two of the words are not needed in the text). Check your answers with a partner.

#### **How Blood Circulates**

The movement of the blood through the heart and around the body is called <sup>(3)</sup>....., and your heart is really good at it — it takes less than 60 <sup>(4)</sup>..... to pump blood to every cell in your body. Your body needs this steady supply of blood to keep it working right. Blood delivers <sup>(5)</sup>..... to all the body's cells.

The left side of your heart sends that oxygen-rich blood out to the body. The body takes the oxygen out of the blood and uses it in your body's cells. When the cells use the oxygen, they make <sup>(6)</sup>..... and other stuff that gets carried away by the blood.

The returning blood enters the right side of the heart. The right ventricle pumps the blood to the <sup>(7)</sup>...... for a little freshening up. In the lungs, carbon dioxide is removed from the blood and sent out of the body when we <sup>(8)</sup>...... What's next? An inhale, of course, and a fresh breath of oxygen that can enter the blood to start the process again. And remember, it all happens in about a minute! <sup>9</sup>

circulation	oxygen	arteries	minute	exhale
inhale	veins	lungs	seconds	carbon dioxide

8. With your partner, write eight True or False statements about the parts of the heart the circulatory system. Do not copy directly from the texts; use your own words. Remember to write the correct answers below in the Answer Key.

When you have finished, test another group's knowledge of the heart and circulation. Test your knowledge by answering their questions.

*Example* The aortic value is a <u>value</u> in the <u>human heart</u> between the <u>left ventricle</u> and the <u>aorta</u>.

1
2
3
4
5
6
7
8

Answer Key

1	5
2	6
3	7
4	8



# 4.5 Writing a Process

1. In pairs, write as many words as you can about the topic of <u>digestion</u>. Remember to write the part of speech (PoS) of each word (noun, verb, adjective and adverb).

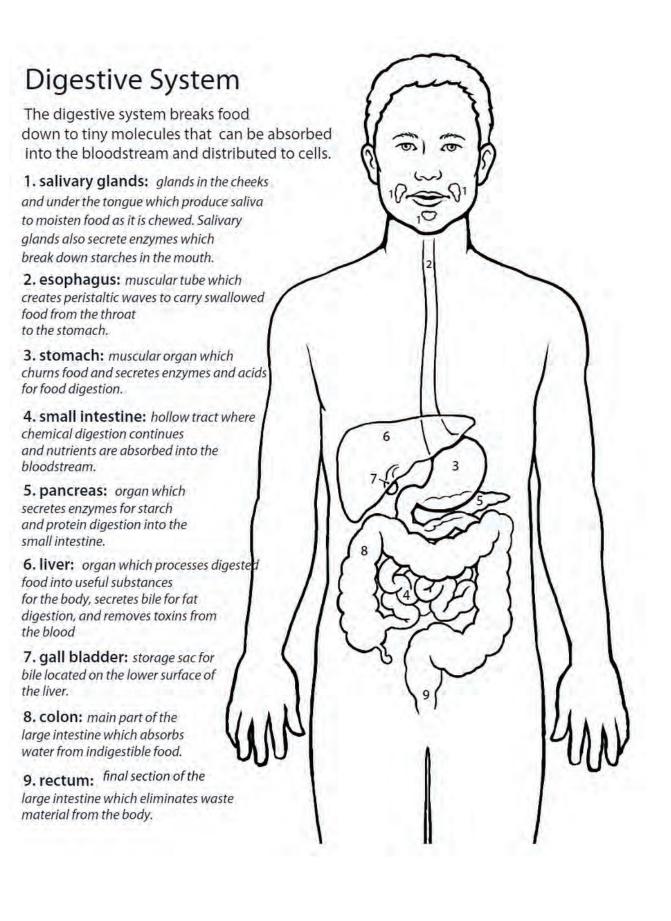
DIGESTION			

2. With a partner, discuss the words in the table below and without using a dictionary, write the meaning of the words in Bahasa Indonesian.

Word	Phonemic transcript	PoS	Bahasa Indonesian
a. digestion	/dʌɪˈdʒɛstʃ(ə)n/	(n)	
b. digestive	/dʌɪˈdʒɛstɪ/	(adj)	
c. nutrient	/ˈnjuːtrɪənt/	(n)	
d. organ	/ˈɔːɡ(ə)n/	(n)	
e. absorb	/əbˈzɔːb	(v)	
f. salivary gland	/səˈlʌɪv(ə)ri gland/	(n)	
g. stomach	/ˈst∧mək/	(n)	
h. bile	/pvil/	(n)	
i. secrete	/sɪˈkriːt/	(v)	
j. eliminate	/ɪˈlɪmɪneɪt/	(v)	

3. Listen to your teacher say each word and repeat each word after your teacher.

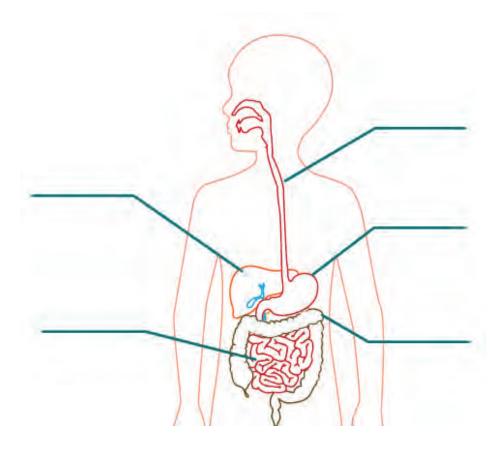
4. Digestion is the way your body gets nutrients and energy from the food you eat. Many organs help in digestion. Read the diagram below.



Match the word for an organ on the left with the correct definition on the right. Then, 5. check your answers with a partner and practise pronouncing the words.

1. oesophagus /ɪˈsɒfəgəs/	a. a long tube where nutrients are taken from food
2. stomach /ˈstʌmək/	b. a tube where food goes down to your stomach
3. small intestine /ɪnˈtɛstɪn/	c. the organ that helps get rid of harmful matter
4. large intestine /ɪnˈtɛstɪn/	d. a bag-like organ that helps dissolve food
5. liver /ˈlɪvə/	e. the last tube where water is taken out of eaten food

6. In pairs, complete the chart below with the name of the correct digestive organ.



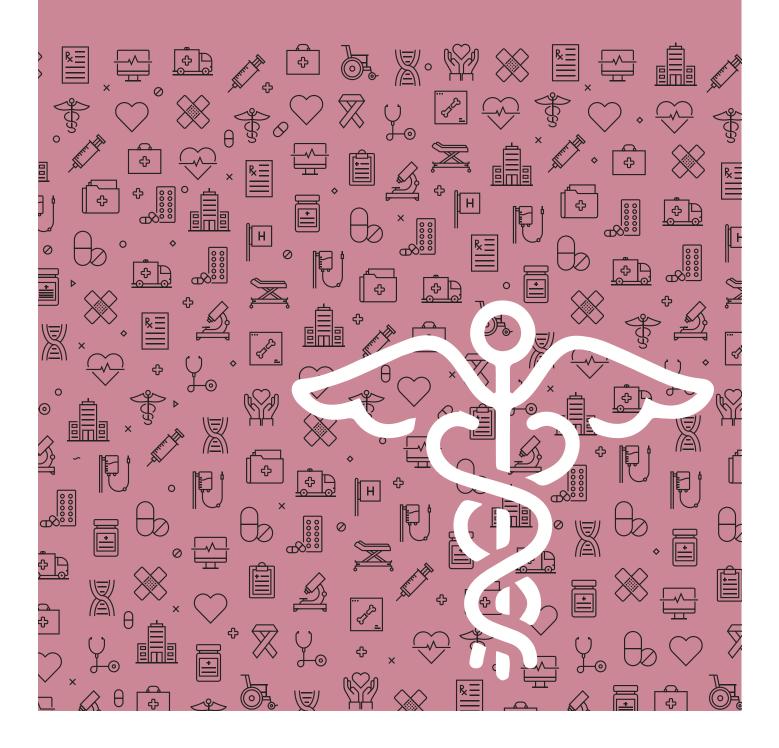
7. With your partner, write 20 verbs in the present tense that are used in describing the digestive process. The first one has been done for you.

1. chew	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

8. With your partner, write the entire digestive process in humans, from food entering the mouth to excrement exiting the body. Write in the present tense (150 words).

#### Module 3

# Introduction to the Hospital English for Nursing 1





## **5.1 Language for Admitting the Patient**



1. In the following dialogue, a patient presents to Accident and Emergency with back pain. Read the following dialogue on your own for understanding. Practice the dialogue with your partner twice. Swap roles for the second practice.

Nurse:	Hello. My name is Jennie, and I'm one of the registered nurses on duty today. I'm going to assess you before we admit you.
Patient:	Oh, hello Jennie.
Nurse:	I see in your notes that you have back pain. Is that right?
Patient:	Yes, I've got terrible back pain. It's so sore.
Nurse:	Oh, that's not good. Can you tell me how you hurt your back?
Patient:	Yes, sure. I've got a little boy. He was crying in the next room and I rushed to see why he was crying, but I slipped over on one of his toy cars.
Nurse:	Can you tell me where the pain is?
Patient:	Well it's mostly in my lower back. You know, right across my back.

- Nurse: And what's the pain like?
- Patient: It's really awful. It's so painful.
- Nurse: What type of pain is it? Is it a sharp pain or a dull ache, for example?
- Patient: It's a sharp pain. It's worse when I try to move.
- Nurse: Okay. How would you rate your pain on a scale between 0 and 10? 0 is no pain, and 10 is the worst pain you've ever experienced.
- Patient: Oh, I'm not sure. It's really bad but I'm not sure which number it is.
- Nurse: For example, 1 to 3 is a mild pain. It's just a niggling pain that's a bit annoying.
- Patient: Well it's more than that.
- Nurse: 4 to 6 is considered moderate pain when the pain interferes with your daily activities. I mean when you can't concentrate on a book, or you find it difficult to get dressed or have a wash. Pain that's worse than that is severe pain. That can be any number between 7 and 10.
- Patient: I understand now. Actually, the pain is really bad. I would rate it as an 8.
- Nurse: **Okay. I'll explain what will happen now**. The emergency doctor will examine you first and you might have an X-ray. I'll get you some pain killers and some anti-inflammatories as well.
- Patient: I've already had some pain killers. I took some at home, but they didn't do anything.
- Nurse: We'll give you some slightly stronger ones as well as the antiinflammatories.
- Patient: That would be great. Thank you so much.
- Nurse: You're welcome. I'll be back in a minute.<sup>1</sup>

<sup>1</sup> Allum, V. (2014). English for Nurses: Back pain Admission. Retrieved from https://www.youtube.com/watch?v=siOhcYFMYP8

- 2. In pairs, discuss the meaning of the following words used in patient assessment.
  - a. Registered Nurse
  - b. back pain
  - c. pain killers
  - d. scale
  - e. mild pain
  - f. moderate pain
  - g. niggling pain
  - h. severe pain
  - i. anti-inflammatories
  - j. recommended dose
- 3. Discuss with your partner the purpose of the following statements/questions.
  - a. Hello. My name is Jennie, and I'm one of the registered nurses on duty today.
  - b. Can you tell me how you hurt your back?
  - c. Can you tell me where the pain is?
  - d. What's the pain like?
  - e. How would you rate your pain on a scale between 0 and 10?
  - f. Okay. I'll explain what will happen now.
- 4. Now, write your own patient admission dialogue.

In pairs, write a conversation between a patient who is being admitted to hospital and the admissions nurse. The admission will be from a minor accident resulting in an injury.

Your questions will aim to determine how the injury occurred, and the severity of the pain in order to make further medical decisions. Use the language in the dialogue above to help you.

Ensure you have a clear beginning and ending to your conversation.

When you have written your dialogue, practice role-playing with a partner. Take turns to be patient and nurse. Record your dialogue on a mobile device and listen to your own pronunciation. Afterwards, you will present your dialogue to the class.

Nurse	Hello. I'mone of the registered nurses on duty today.
Patient	
Nurse	
Patient	

#### **5.2 Grammar for Modals of Obligation and Advice**

1. Look at the picture below. Discuss the questions with a partner.



- a. Where do you think these people are?
- b. What are they waiting for?
- c. What rule are these people obeying in the photo?

2. Discuss the expressions below and complete the table with the correct use for each level of obligation.

must	
should	
could	

Mild obligation, recommendation, advice can be substituted with "have to"					
Strong obligation	made as	s a suggesti	on	often use	d with "if"
A possibility in decision ma	aking C	Can be subsi	tituted with "o	ught to"	giving advice

Г

3. Below are the grammar rules for using talking about obligation, giving advice or making suggestions. Read through the rules and check your understanding with a partner.

	Form of use	
a. should	subject + should + infinitive	
b. shouldn't	subject + should + not (shouldn't) + infinitive	
c. must	Subject + must + infinitive	
d. must not	subject + must + not (mustn't) + infinitive	
e. have to	subject + have or has to + infinitive	
f. don't/doesn't have to	subject + don't have or doesn't have to + infinitive	
g. could	Subject + could + infinitive without "to"	

- 4. Use one of the above modals of obligation or advice, in the positive or negative to complete the sentences below.
  - a. <u>An obese person</u> **should** *reduce* their daily kilojoule intake to maintain their health.
  - b. You ..... exercise each day to keep your diabetes under control.
  - c. A person with an infectious disease ..... mix with other people.
  - d. A person with an infectious disease ...... stay at home until they have recovered.
  - e. You ..... try another diet if this one does not suit you.
  - f. In Australia, people ...... go outside to smoke.
  - g. In many countries, people don't ..... to go to a pharmacy for prescriptions.
  - h. The doctor told my brother that he ...... stay in the hospital because he ...... have surgery on his arm.

5. Write sentences with must/ must not, have/has to or do/does not have to. Number one has already been done for you.

Attend the night round to check if my patient's results have arrived. I must attend the night round to see if my patient's results have arrived.

a.	Put on my mask in the hospital area
b.	Check new patient's temperature as she is very hot
с.	Wash their hands before entering the hospital
d.	Keep distance at least 1.5 meters away from other people
e.	Isolate yourself for 14 days if you have been exposed to the virus
f.	Do a test immediately if you experience symptoms of the virus.

### 6. Practice the following dialogue with your partner

Patient	Nurse, I think I might have a fever. I feel cold and shivery! And it has been three days since I got a cough.
Nurse	Here, let me get a thermometer and check your temperature.
	Mmmm.
Patient	Do I have a fever?
Nurse	Yes, you do.
Patient	What is the reading?
Nurse	It's a bit high. Just over 38. Do you have a sore throat?
Patient	Yes. A bit.
Nurse	Have you been out of town recently?
Patient	Yes. I went to Jakarta for a business trip.
Nurse	Can you breathe normally?
Patient	Yes.

Nurse As a precaution, **you must have** a Rapid test for COVID-19 and the doctor will refer you to the hospital lab.

Patient Am I infected?

- Nurse We do not know until we get the lab check, Until we get the results, you have to follow all COVID-19 hospital procedures. You have to socially distance from other patients, and unfortunately you can't have any visitors. You must wear a mask at all times, and you should wash your hands frequently. If the doctor says that he can leave, you must self- isolate at home for 14 days.
- Patient Oh my god. Okay, well that's the way it goes.
- Nurse You **have to keep** your body fit and **you should** eat healthy food to increase your immune system.
- Patient Yeah, I will. When will the doctor come?
- Nurse Please wait, the doctor is on her way. You**\_must not do** anything until the doctor checks your condition. You will be fine.
- Patient Yes, thank you. I'm so scared.
- Nurse You're in good hands here! You'll be okay.
- 7. Write 5 sentences about how nurses should look after themselves in a health crisis. Example: I **must wear** PPE at all times while on duty.

a.	
b.	
c.	
d.	
e.	

8. Write 5 sentences about nurses who should look after others in a health crisis. Example: I **must wash** my hands thoroughly after touching patients.

a.	
b.	
C.	
d.	
e.	



# **5.3 Reading about Admitting a Patient**

1. In pairs, discuss the scenario in the image below.



2. Match the vocabulary with the definitions in the table below.

Vocabulary		
1. Patient admission		
2. Emergency unit		
3. Outpatient department		
4. Inpatient department		
5. Medical record		

Definition		
a.	a. The part of a hospital designed for the	
	treatment of people with health problems who	
	do not require a bed or admission for	
	overnight care.	
b.	A patient's documented history of medical	
	care with a health care provider.	
C.	c. A unit of a hospital or a healthcare facility	
	where patients are admitted for medical	
	conditions that require appropriate care.	
d.	The room or department in a hospital where	
	people who have sudden severe injuries or	
	health problems arrive.	
e.	The process of accepting someone into	
	a hospital, clinic, or facility for treatment.	

- 3. With a partner, discuss which of the following would take place during a patient's admission to hospital? Tick the sentences with your choices.
  - a. The patient's medical history is taken.
  - b. The patient's identity (ID) bracelet is taken off.
  - c. The patient's signs and symptoms are noted.
  - d. The patient is sent home and told to call later.
  - e. The patient is given the doctor's phone number.
  - f. The patient changes into a hospital gown.
  - g. The nurse prepares the patient for surgery.
  - h. The patient's medical record is signed off.
- 4. Read the following text. Check how many of your answers above are mentioned in the text. In a small group of students, decide on the best title for the following text. Write the title in the space provided below.

.....

There are several Duties and Responsibilities of the nurse during patient admission. The patient can be admitted in the hospital from the outpatient department (OPD) room or in the Emergency Unit. The patient will get early examination or emergency treatment before the patient is transferred to a suitable ward for admission or inpatient treatment. The admission procedure will be recorded in the medical record with the present medical history of the patient. The medical record is noted at OPD containing etiology of disease and the patient with admission papers duly signed by doctor-in-charge of admission before being transferred to the inpatient department (IPD).

The duty nurse or nurse in charge in the ward is to take care of the patient immediately and make the patient feel comfortable for continuing treatment. The details of duties of a nurse while the patient reports for admission are being described below:

- Receive the patient with courtesy.
- Facilitate the patient mobility
- Help the patient to prepare for doctor visits
- Preparing the patient comfort in the bed
- Make notes about the number, time and date of receipt of patient, names of relatives or telephone number etc. On Temperature Pulse Respiration (TPR) chart only name and bed number
- Prepare informed consent form for immediate surgery (take signatures of patient or relative for anesthesia).
- Provide all nursing equipment like urinals, bed pans, feeding cups etc., if patient needs.
- Take vital sign monitoring of the patient and note it in the patient's chart.
- Ask the important advice from doctor
- Take diet monitoring of the patient and note it in the patient's chart.
- Monitor the treatment i.e. medicines, fluid etc.
- Prepare for diagnostic examination
- Prepare the patient for surgical preparation
- Provide the personal hygiene care for the patient
- Keep the patient safety and sterile
- Facilitate communication with family
- Manage the visitors coming
- If any medicine is to be purchased from the market, give a slip to the attendant's relatives.
- Introduce the patient to the hospital environment, especially adjacent to bed.<sup>2</sup>

5. Decide if the following statements are True (T) or False (F) based on information in the article. Check your answers with another student.

a.	The patient will enter the hospital during admission from the outpatient department (OPD) room or from the emergency unit	т	F
b.	The patient will be transferred directly to a suitable ward before admission	Т	F
C.	The patient's admission form will be signed by the nurse in charge before admitting the patient.	Т	F
d.	The medical record will specify the causes of any disease if relevant.	Т	F
e.	After being examined, the patient will be transferred to the outpatient department (OPD).	Т	F
f.	The family should prepare all the administration forms during patient admission.	Т	F
g.	The duty nurse takes over patient care after admission.	т	F
h.	The duty nurse facilitates communication with the doctor during doctor visits.	Т	F
i.	After admission, the patient should be helped to move if necessary.	т	F
j.	The nurse will record the patient's contact details.	Т	F

Introduction to the Hospital English for Nursing 1

## 5.4 Vocabulary to Talk about Measuring Vital Signs

8

- 1. What vital signs are usually measured when you visit the doctor? With a partner, think about the last time you went to the doctor. Discuss which of these, if any, were measured.
  - a. Temperature
  - b. Pulse
  - c. Respiration
  - d. Blood Pressure

Discuss with the class why doctors want this information? What is the purpose of this information?

- 2. Answer the questions below with your partner.
  - a. Which 2 body measurements are used to calculate Body Mass Index (BMI)?

..... and .....

b. Fill in the gaps below to complete the BMI formula.

Body Mass Index =  $\dots$  (kg) ÷  $\dots$  (m<sup>2</sup>)

c. What does a person's BMI indicate?

3. The 4 main vital signs routinely measured by health practitioners are listed below. Briefly note what information these vital signs provide to a doctor.

a.	Temperature	
b.	Pulse	
C.	Respiration	
d.	Blood Pressur	re

### 4. In pairs, briefly note what information the following indicators provide to a doctor.

a.	pulse rate	
b.	body weight	
C.	body height	
d.	blood pressure .	
e.	respiratory rate	
f.	body temperature	

### 5. With a partner, fill out the table below with the information.

a.	Your partner's body weight	
b.	Your partner's body height	
C.	Your partner's pulse rate	
d.	Your partner's respiratory rate	

MEASUREMENT	YOUR PARTNER	YOU
a. weight		
b. height		
c. pulse rate		
d. respiratory rate		

- 6. Read the following text, and with a partner, choose the best title for the text. Write the correct title in the space provided.
  - a. The effect of blood pressure on health
  - b. How Is Blood Pressure Measured and What Do the Numbers Mean?
  - c. The symptoms of low blood pressure

When you visit your healthcare provider, a blood pressure measurement is one of the most important routine tests you'll have.

.....

Blood pressure is the force exerted by your blood against your arteries. As your heart pumps, it forces blood out through arteries that carry the blood throughout your body. The arteries keep tapering off in size until they become tiny vessels, called capillaries. At the capillary level, oxygen and nutrients are released from your blood and delivered to the organs.

## Types of Blood Pressure

There are two types of blood pressure: Systolic blood pressure refers to the pressure inside your arteries when your heart is pumping; diastolic pressure is the pressure inside your arteries when your heart is resting between beats.

When your arteries are healthy and dilated, blood flows easily and your heart doesn't have to work too hard. But when your arteries are too narrow or stiff, blood pressure rises, the heart gets overworked, and arteries can become damaged.

### Measuring Blood Pressure

Blood pressure is measured with an instrument called a sphygmomanometer. First, a cuff is placed around your arm and inflated with a pump until the circulation is cut off. A small valve slowly deflates the cuff, and the doctor measuring blood pressure uses a stethoscope, placed over your arm, to listen for the sound of blood pulsing through the arteries. That first sound of rushing blood refers to the systolic blood pressure; once the sound fades, the second number indicates the diastolic pressure, the blood pressure of your heart at rest.

Blood pressure is measured in millimeters of mercury (mm Hg) and recorded with the systolic number first, followed by the diastolic number. For example, a normal blood pressure would be recorded as something under 120/80 mm Hg.

Blood pressure readings can be affected by factors like:

- Smoking
- Coffee or other caffeinated drinks
- A full bladder
- Recent physical activity

Blood pressure is also affected by your emotional state and the time of day. Since so many factors can affect blood pressure readings, you should have your blood pressure taken several times to get an accurate measurement.

### What Is Normal Blood Pressure?

Experts consider normal blood pressure to be less than 120/80 mm Hg. Based on population data, about 42 percent of American adults have normal blood pressure. At one point, blood pressure at or above 120/80 and less than 140/90 was considered normal to high; these numbers are now considered pre-hypertensive. Blood pressure consistently at or above 140/90 is considered high blood pressure or hypertension.

Blood pressure normally rises as you age and grow. Normal blood pressure readings for children are lower than for adults, while blood pressure measurements for adults and older teenagers are similar.

Blood pressure can also be too low, a condition called hypotension. Hypotension refers to blood pressure lower than 90/60. Symptoms of hypotension include dizziness, fainting, and sometimes shock.<sup>3</sup>

<sup>3</sup> Everyday Health. (2020). How Is Blood Pressure Measured and What Do the Numbers Mean? Retrieved from https://www.everydayhealth.com/hypertension/understanding/what-does-blood-pressure-measure.aspx

#### 7. Fill in the missing information using one of the words provided below.

coffee	hypertension	blood pressure
sphygmomanometer	hypotension	

- a. A person's ..... is often taken during a visit to the doctor.
- b. .....is the term used to describe blood pressure which is too high.
- c. Drinking ...... may affect a person's blood pressure reading.
- d. ..... is the term used to describe blood pressure which is too low.
- e. A ..... is a device which measures blood pressure.
- 8. On your own, answer the questions below. Check your answer with a partner and take turns to explain the meaning of each answer.
  - a. What is blood pressure?

.....

b. Name the 2 different types of blood pressure readings.

Explain what these 2 readings refer to.

.....

.....

c. Note 4 factors which can affect a person's blood pressure reading.

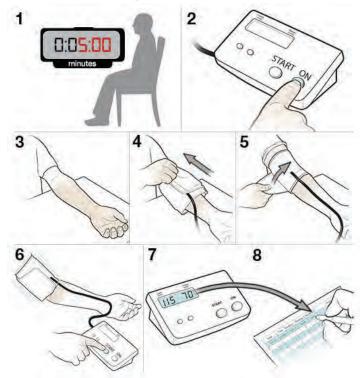
.....

.....

- d. What is considered to be the normal range of blood pressure?.....
- e. What blood pressure reading indicates hypotension?

.....

9. Examine the 'Step-by-Step' diagram below on your own.



## Step-by-Step checking your blood pressure

- a. Write down the instructions for each step. Check that you have used the correct technical vocabulary for the medical device shown.
- b. Learn each step.
- c. Work with a partner and take turns to explain to each other the 8 steps of taking a blood pressure reading, without referring to your notes.

1.	 •••	 • • • •	• • •	•••	 •••	 •••	 •••	• • •	••	 •••	 	•••	••	••	•••	• •	•
5.	 	 		•••	 •••	 •••	 		•••	 • • •	 		•••	••			
6.	 	 		•••	 •••	 •••	 •••		••	 •••	 	•••	•••	•••	•••		
7.	 	 		•••	 •••	 •••	 •••		•••	 •••	 		••	•••			
8.	 	 		•••	 •••	 •••	 		•••	 •••	 • • •			•••			

# 5.5 Writing a Hospital Notice

- 1. Discuss the following questions with a partner.
  - a. How important is it for a hospital to be clean and hygienic?
  - b. Who is primarily responsible for hygiene in a hospital environment?
  - c. How much time do nurses spend cleaning in a hospital or clinic?
  - d. How do staff find out about hygiene and cleanliness procedures?

2. In pairs, label each picture correctly. Use the given words in the box.



clinical waste bin	soap dispenser	disposable gloves
/ˈklɪnɪkəl weɪst bɪn/	/səʊp dɪsˈpɛnsə/	/dɪsˈpəʊzəbl glʌvz/
cleaning bucket	cleaning bleach	mop
/ ˈkliːnɪŋ ˈbʌkɪt <b>/</b>	/ ˈkliːnɪŋ bliːʧ/	/ mɒp/

3. The Ward Sister and the nurse on duty are discussing the result of a recent hygiene inspection. Read the dialogue between the two nurses. Check any new vocabulary with your partner.

Ward Sister:	Good morning Nurse. I need to talk to you about the hygiene					
	inspection.					
Nurse:	Good morning Sister. How was our score?					
Ward Sister:	Unfortunately it was only three out of ten					
Nurse:	Oh dear. That is terrible score. Unfortunately, the inspectors came at					
	a very bad time this morning. We were all very busy.					
Ward Sister:	Well, I have their report here and I want to run through the important					
	things. For example, under 'Ward hygiene, it says 'Door handles are					
	not regularly cleaned. Beds are not always cleaned between patients.					
	Toilets must be cleaned three times a day, but they are only cleaned					
	once a day. Floors must be cleaned four times a day, but they are					
	only cleaned once a day.' Under 'Spillages of bodily fluids'. the report					
	says that the average time was thirty-five minutes to clean up a					
	spillage of urine. And it says 'Nurses' knowledge of MRSA is good,					
	but they don't always wear gloves.					
Nurse:	We certainly need to improve, but we are very short staffed at the					
	moment.					
Ward Sister:	It also says here, 'Nurses must wash hands before putting on gloves					
	and after removing gloves.					
Nurse:	Thank you Sister. We must improve hygiene practices together. <sup>4</sup>					

4. Why did the ward fail their hygiene inspection? Make a list of the major problems below.

<sup>4</sup> Grice, T. (2007). Nursing 1 Students Book. Oxford University Press: Oxford.

5. Review the rules for modals of obligation. With a partner, match these examples with rules that need to be followed in a hospital.

must	We use <b>must</b> in rules and to say when things are necessary.
mustn't / must not	We use <b>mustn't</b> to say it is necessary that you do NOT do something.
have to	We use <b>have to</b> to talk about things that other people oblige us to do.
don't have to	We use <b>don't have to</b> to say something is not necessary.
need to	We use <b>need to</b> to say it is necessary to do something

- a. We must follow procedures more carefully = to say when ... things are necessary......
- b. Sorry. I have to go. I'm on duty in ten minutes. = to say when .....
- c. You must not forget to put gloves on= to say when. .....
- d. We need to clean the floors more often = to say when. .....
- e. You don't have to wash her face. She can do it herself = to say

when.....

f. All visitors must wash their hands before entering the ward. = to say when

.....

- 6. With a partner, review rules for a hospital environment. Decide what level of obligation is required for each rule. Check your answers with another pair and discuss why you chose your answers
  - a. You......wear a nurse's uniform while on duty.
  - b. You..... have a name tag on your uniform.
  - c. You'll..... mop the floor- there's been a spill.
  - d. The patient ...... the patient won't help his

recovery.

e. You ..... the bins. They are full and overflowing. He

Ward Sister ..... complete a hygiene report on a weekly basis.

- f. You ..... fill the soap dispenser in the bathroom. It's empty.
- g. You ..... turn off your mobile phone when you enter the hospital.
- h. You ..... change your gloves after contact with each patient.
- 7. Imagine you are working in a hospital. The Ward Sister has asked you to write a notice reminding nurses about good hygiene practice. Write a list of rules and instructions for the nurses on your ward. Write at least 10 rules using a variety of modals from above.

## **HOSPITAL NOTICE**

- 1. You must report all spillages immediately.
- 2. All visitors have to leave the ward by 8pm.
- 3. Visitors should....

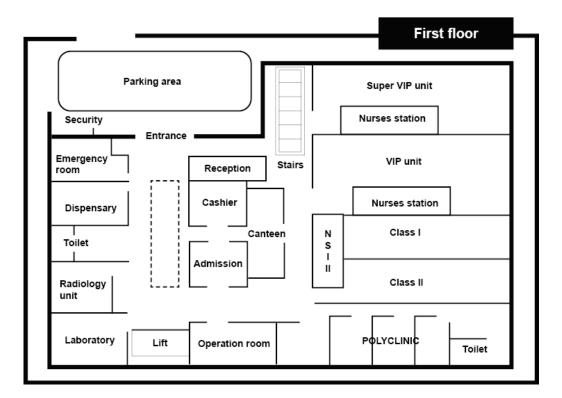
# 6.1 Language for Giving Directions

- 1. With your partner, discuss the following questions with a partner.
  - a. Where do you think you would find a floorplan like the one below?
  - b. What would visitor do if they could not find the location of a certain unit in the hospital?

θ

¢

- c. Who could they ask for assistance?
- d. What other forms of information may be available?



- 2. Find the words in the floor plan which correspond to the definitions below. Write the words in the space provided.
  - 1. a door or gate by which you can access a building or place .....
  - b. a person or office which accepts payments for hospital costs .....
  - c. department in a hospital which uses medical imaging to diagnose and treat diseases .....
  - d. a place to pick up medications or medical supplies

3. Use the expressions in the box to practice asking for directions around the hospital in the floorplan.

"Excuse me. How do I get to the **lifts** please?" "Pardon me. Where are the nearest **toilets** please?" "Sorry to bother you, but. I'm looking for the **Polyclinic**. Can you direct me there?

4. Write your own questions asking for directions to the following places in the floor plan. Use the language structure from the previous activity.

VIP Unit	
Nurse Station	
Canteen	

5. Use the language in the box below to direct a person to the following places in the hospital floorplan. The person is at the entrance to the hospital. Write the directions in the space provided.

Turn left/turn right	at the	Go past/around					
Walk down/along	the	The ,,,,, is on your left/right.					
The Is oppos	site	The Is next to the					
The Is between	n the and th	De					
Lifts							
Toilets							

Polyclinic	
Nurse Station	
VIP Unit	
Canteen	

6. You are going to draw a floor plan for a small hospital with a partner. Your floorplan has 2 levels, and will include the following services and medical units:

Ground floor	First floor
Carpark	Nurses' station
Information desk	Medical imaging
Cafeteria	Intensive care unit (ICU)
Cashier	Respiratory unit
Gift shop	Cardiac unit
Stairs	Stairs
Restrooms	Restrooms
Lifts	Lifts

7. Work in pairs to create 2 short dialogues which involve asking and giving directions, using the map you created in the previous activity. Practice speaking the dialogue with your partner.

Try to use different language for each dialogue.

Dialogue 1: A patient who is being discharged from the Cardiac Unit needs to pay the bill at the Cashier. Write a nurse / patient dialogue in which the patient asks for directions and the nurse gives directions. Your dialogue should be about 8 - 10 lines.

Dialogue 2: A visitor is at the Information Desk on the ground floor. He wants to visit a relative in the Cardiac Unit and needs directions. Write a receptionist / visitor dialogue in which the visitor asks for directions and the receptionist gives directions. Your dialogue should be about 8 - 10 lines.

8. Practice the speaking the dialogues with your partner.

# 6.2 Grammar for Prepositions of Place

### 1. Read the descriptions below of why and how prepositions of place are used.

A preposition is a word which shows the relationship between a noun and the other words in a sentence.

A preposition of place is used with a noun, pronoun, or noun phrase to show direction or location (place).

A preposition of place allows us to be very specific when talking about where an action takes place or when discussing important details when we communicate.

Preposition Rules:

- a. The subject and the verb always come before the preposition.
- b. A preposition is always followed by a noun.
- c. A preposition is never followed by a verb.

Prepositions of Place						
general		specific				
in	on	at				
indicates inside an enclosed space	indicates a surface	indicates a point				
in spaces and places with boundaries neighbourhoods cities countries	on a surface plate, table, floor streets, roads islands transportation	a specific location addresses building corner of home, work				

d. A preposition comes before its object.

2. Complete the following table with diagrams which show the meaning of the preposition. The first answer has been done for you.

up	down	around	from	to	across	between	through
Î							
in front of	behind	above	over	under	below	towards	to the right/left of



3. Look at the picture above with your partner.

Describe the location of the following people or objects in sentences using the most accurate preposition. There may be different ways to describe where someone or something is located. You are describing locations from your perspective.

a.	the nurse	The nurse is sitting <b>behind</b> the desk. The nurse is <b>to the left</b> of the picture.
b.	the reception sign	
c.	the door	
d.	the woman	
e.	the man	
f.	the visitor at the desk	
g.	the pot plant	
h.	the window	

#### 4. Complete the table with the correct information

Vocab	Definition	Part of speech	
pharmacy	a place where medications are prepared and sold		ˈfaːməsi/
	a narrow passage or hallway leading to rooms or other spaces		
	describing an area which has plenty of room		
	the place or point where two or more things meet		
	a mechanism for moving people or objects up or down to different levels		

elevator	noun	adjective
/ˈspeɪʃəs/	intersection	pharmacy
corridor	spacious	/ˈɛlɪveɪtə/
noun	noun	/ˈkɒrɪdɔː/
- <del>'fa∶məsi/</del>	/ɪntəˈsɛkʃ(ə)n/	noun

5. Read the following dialogue and underline the prepositions of place.

- Patient: Good afternoon, Nurse. Can you help me?
- Nurse: Good afternoon. Yes, sure. What can I do for you?

Patient: I have to buy the medicine prescribed for me. But I can't find the pharmacy. I have walked around this unit several times, but I can't find it.

Nurse: Well, the pharmacy is on the first floor.

Patient: Can you show me how to get there?

Nurse: Sure. You have to walk along this corridor until you find the stairs, then go down to the first floor. Then turn right until you find the intersection of two corridors. Turn left, and you will see a spacious waiting room near the exit. The pharmacy is in the corner of the room, in front of the payment counter.

But if you use the elevator, you will get out at the intersection and you won't have to look for it. To get to the elevator, from here, just follow this corridor. It's on your left, at the end of the corridor.

Patient: It seems faster by elevator, right?

Nurse: Yes, you're right.

Patient:	Ok. So, I need to walk down this corridor until I find the
	elevator at the end. I go downstairs then I will find the
	intersection. Turn left then I will find a spacious waiting room
	close to the exit and the pharmacy is in the corner, in front of
	the payment counter. Have I got it right?
Nurse:	Yes, you've got it.
Patient:	Ok, thank you so much

Nurse: My pleasure!

6. Read the following case notes and use the correct prepositions to fill in the gaps.

on	under	next to	to	in	next to
to	in	up to	outside	around	on

- 7. Complete the sentences below using the correct preposition.
  - a. My father was admitted to the respiratory ward which was ...... the fourth floor of the hospital, ..... the East Wing.
  - b. The nurse wore a mask ..... her face.
  - c. The nurse placed the thermometer ..... the patient's tongue.
  - d. The child minding centre is ...... the back of the building.
  - e. The delirious patient tore ..... his bandages.
  - f. The man arrived ...... a stretcher complaining of severe pain ..... his head.
  - g. The telephone was connected ...... his room.
- 8. In pairs, take turns to give your partner directions to a location on your campus. Your partner will try to guess which location you are directing them to.
- 9. In a group of five, describe a place of interest or a landmark near your campus. The students in your group will try to guess which location you are describing.

Introduction to the Hospital English for Nursing 1

## 6.3 Vocabulary to Talk about Hospital Departments

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1. Think about a time you visited a hospital. Was it easy or difficult to find your way around the hospital? Discuss your experiences with your partner.

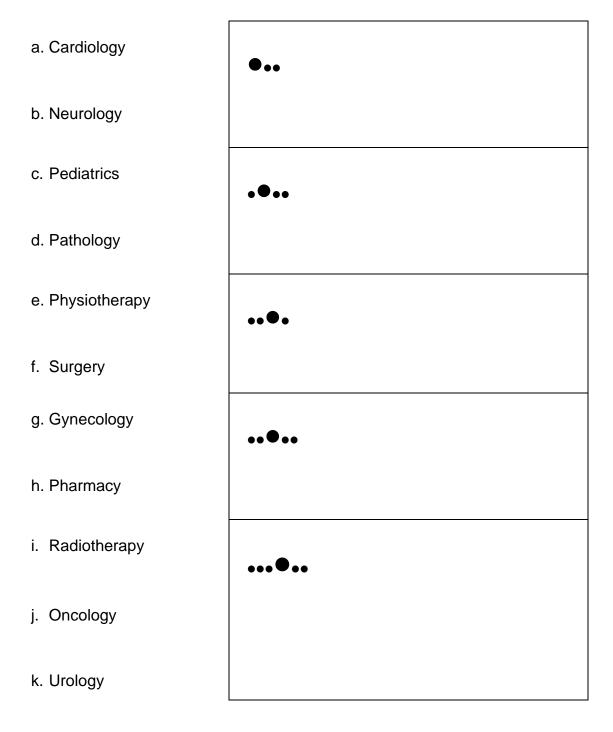
2. Look at the list of hospital departments you would find on entering a hospital. Match the department with its key role below.



- a. dispenses medicine .....
- b. specializes in the brain and its nerves.....
- c. treats kidney diseases..
- d. for labour and birthing

e.	for the elderly	
f.	plans treatment programs and physical exercises for patients	
g.	specializes in the health of the heart	
h.	radiotherapy treatment for diseases like cancer	
i.	specifically for sick children	
j.	specializes in the health of kidneys, bladder and adrenal glands <sup>5</sup>	

3. Match the names of the following departments in a hospital to their stress pattern below. When you are finished, listen to your teacher pronounce these words. Then practise in pairs.



4. Complete the sentences by putting the places in a hospital into the sentence gaps.

Pathology	Labour Room	Pharmacy	Surgery
Physiotherapy	Cardiology	A & E	Oncology

- a. My daughter is having a baby. Which way is it to ..... please?
- b. My friend was in a serious crash on his bike. He arrived in the ambulance a few minutes ago. Where is .....?
- Matima is in ..... now. The operation on her knee will take about 3 hours.
- d. My husband is meeting his cardiologist today. Could you direct me to ....., please?
- e. I'm starting my chemotherapy treatments today. Which way is .....?
- f. I need to pick up some antibiotics for my wife. Can you direct me to the .....?
- g. I've just finished my appointment with my doctor and he has asked me to have some blood samples taken. Where can I find .....?
- h. My son had a terrible motorbike accident and is learning to walk again. He is here today having therapy. Could you direct me to .....?

5. Prepositions of place are used to help describe the place where something is or about movement from one place to another.



Look at the directions below which may be used to help a patient, their family member, or a colleague in a hospital. By yourself, circle which preposition you think is correct and then check with your partner.

- a. Walk through / near reception, and take the lift to / at / in the third floor.
- b. Go around / along / past this corridor, and it is the third door on / at the left.
- c. If you go past / through / behind the swing doors, you will see the waiting room.
- d. The toilets are at the **bottom of / over** the stairs.
- e. Physiotherapy is **in front of / opposite** this department, so just go **across /out of** the corridor.
- f. Go past /down the restaurant and take the stairs up to / along /on the second floor, and the ward is out of / opposite the lift.<sup>6</sup>

<sup>&</sup>lt;sup>6</sup> Grice, T. (2007). Nursing. Oxford University Press: Oxford.

# 6.4 Writing a Formal Email

- 1. Discuss the following statements about sending emails with your partner. Do you agree or disagree? Why?
  - a. Be concise and to the point. Avoid long emails that are discouraging to read.
  - b. You shouldn't write in CAPITALS in letters, but this is ok in emails.
  - c. Leave the message thread in your email to save the recipient time and frustration looking for earlier messages.
  - d. Proof-read your email before you send it.
  - e. Only copy in other people if they know why they are receiving a copy of the message.
  - f. It is ok to use abbreviations and emoticons in work emails.<sup>7</sup>
- 2. Match the following nouns used to talk about emails with their meanings.

Nouns			
1. spam (n)			
2. an attachment (n)			
3. a message thread (n)			
4. read receipt (n)			
5. an emoticon (n)			

Me	Meanings				
a.	confirmation that you have read something				
b.	the history of correspondence				
C.	a combination of symbols, e.g. — used in an email to express a particular emotion.				
d.	unwanted emails, usually advertisements				
e.	a file, e.g. a document, photo or computer program, which is joined to an email				

<sup>7</sup> Lingahouse. (2020). Writing emails. Retrieved from https://www.linguahouse.com/esl-lesson-plans/business-english/writing-emails

3. Email language can be formal or informal depending on who you are writing to. Decide which of the phrases below should be used in formal or informal writing.

I am writing to inform you that	Can you?	Just to follow up from our chat on,	Don't forget to
I've attached for you	How are you doing?	I look forward to seeing you on	Please be reminded to
Best regards	See you soon	So, I've included your appointment time for you.	I hope this email finds you well.

FORMAL phrases	INFORMAL phrases

- 4. Scan the email below. Can you identify the parts of the email? Circle or underline with a partner.
  - 1. sender2. salutation3. subject line4. signature block5. email address6. closing

From: admission@muhammadiyahhospital.com

Subject: Reservation Mrs. Rhosma OG-180619007

Date: 15 June 2020 13.20

To: sofia rhosma sofiarhosma84@gmail.com

Dear Mrs. Rhosma,

I hope this email finds you well.

I am writing to inform you that your booking via the Health.Mu application on Monday, 15 June 2019 has been confirmed.

We can confirm your appointment for Wednesday, 18 June 2019 with D. Ghulam Manar, Sp.OG (K) at Obstetrics unit. Your registration number is OG-180619007. Prior your medical check, please show your registered ID at the Polyclinic admissions desk.

Please find attached directions on how to find us:

UNIMUS Hospital JI. Kedungmundu No.18, Kedungmundu, Kec. Tembalang, Kota Semarang, Jawa Tengah 50273, Indonesia.

The polyclinic is located on the third floor. From main entrance, follow the corridor until you find an elevator. From there, go up to the third floor. From elevator, turn left, follow the corridor, and you will find the Obstetrics unit on your right after the pharmacy.

The clinic is well sign posted. Please do not hesitate to ask one of our friendly staff for assistance should you require it.

Best regards,

Annisa

Admission team Muhammadiyah Hospital Semarang

- 5. Read the email again and then answer the questions.
  - a. What is the purpose of the email?
  - b. Is the email formal or informal? How do you know?
  - c. How has the patient been addressed in the email?
  - d. What important information has been included?
- 6. With a partner, write a formal email welcoming a new nurse to your ward.

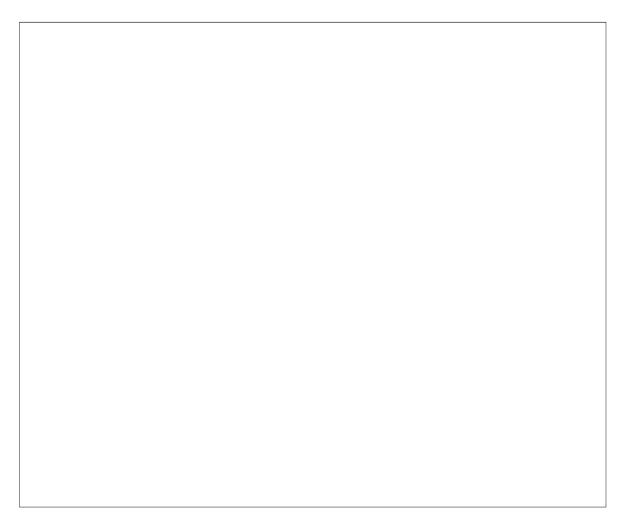
Provide information for their first day including what time to arrive and how to get your new ward in the hospital complex.

In your email, include

- a. a well-constructed subject line
- b. brief, direct and formal writing including salutations and closing
- c. timelines for actions and responses when necessary.
- d. a clear layout for readability
- e. an email signature

Ask your classmate to reply to your email.

<u>To :</u>		
<u>CC:</u>		<u>Hide BCC</u>
BCC:		
Subject:		
	Add Attachment	
	No Attachments	







# 7.1 Vocabulary to Ask about Places in a Hospital

Discuss the scenes in the images below with your partner.
 Without using a dictionary, identify each department and match with the following names.
 Write the names in the spaces provided.

Waiting RoomNeurologyPharmacyOutpatient clinicImage: Additional state of the state of t

a. .....



C. .....

b. .....



d .....

2. Your teacher will say each word. Repeat each word together after your teacher.

outpatient clinic (noun)	neurology (noun)
/ˈaʊt.peɪ.ʃənt/ /ˈklɪn.ɪk/	/njʊəˈrɒl.ə.dʒi/
waiting room (noun)	pharmacy (noun)
/ˈweɪtɪŋ ruːm /	/ˈfɑː.mə.si/

- 3. Read the following dialogue between a nurse and a nursing student (NS) and decide where the conversation takes place.
  - a. in a canteen
  - b. in a hospital
  - c. in the kitchen

NS: Good morning, Nurse. I'm a nursing student here.

- Nurse: Good Morning. I'm the nurse in this hospital who looks after student nurses. My name is Annisa. Can you tell me your name? Are you new here?
- NS: Oh sorry, I forgot to introduce myself. My name is Dewi. Yes, Annisa, today is my first day here. Would you like to explain more about this hospital to me? I need more information about it.
- Nurse: Because you are new, I'll explain to you about the different units in this hospital. This is the east wing, right. The Accident and Emergency Department is near the entrance, with A & E signs. This is a department where patients come without prior notice.
- NS: A & E ... Accidents and Emergency. Ok yes, that's clear, Annisa. What about those who are not in danger?
- Nurse: Well, patients who are not severely injured and whose life is not in danger, are asked to consult a specialist at one of our clinics for a detailed diagnosis. Can you see a large sign saying 'Neurology' on your right?

NS: Neurology. Yes, I think I've heard of that before.

Nurse: Patients are sent there if their condition is related to problems with their nervous system. Opposite is a sign which says 'Cardiology', where

patients suffering from heart disorders are sent. After assessing a patient, the doctor may prescribe medications, which the patient can pick up from the pharmacy at the end of the hall.

- NS: Neurology on my right, Cardiology on my left & the Pharmacy at the end of the hall. I've got that. What about people who only come for treatment but are not admitted?
- Nurse: We call these patients outpatients, and they go to the Outpatient Clinic which is next to Cardiology.
- NS: Outpatients. OK. What about people who are brought in after accidents or with serious conditions, you know, when an ambulance brings them in?
- Nurse: Well, they are taken upstairs, where we will go now. This is where patients with severe injuries or diseases are transported. On your left you can see the operating rooms, where surgery is performed.
- NS: Pardon, could you repeat that please, Nurse?
- Nurse: SURGERY. That means when someone has an operation.
- NS: Ok, surgery means operations. I've learnt a lot. Thank you Annisa for all of your helpful information.
- 4. Read the text again, and identify language which:
  - a. asks for information or
  - b. repeats information as confirmation of understanding or gives further explanation

Put the expressions into one the correct column below. The first one has been done for you.

Asking for Information	Repeating
Can you tell me your name?	

- 5. Practice the dialogue with another student. Take turns in the different roles.
- 6. Practice your pronunciation of the following vocabulary from the dialogue. Match each phonetic spelling to one of the words below.

hospital	department	patient
danger	system	disorder
treatment	left	send

a. /ˈhɒs.pɪ.təl/	
b. /ˈdeɪn.dʒər/	
c. /send/	
d. /left/	
e. /dɪˈsɔː.dər/	
f. /ˈpeɪ.ʃənt/	
g. /ˈtriːt.mənt/	
h. /ˈsɪs.təm/	
i. /dɪˈpɑːt.mənt/	

7. Google a floorplan of a hospital in your local district. Use the plan to give directions in the following activity.

Write a short dialogue for scenarios 1 & 2. Practice the dialogue with your partner. Record the dialogue on a mobile device so that you can listen to your pronunciation.

#### Scenario 1:

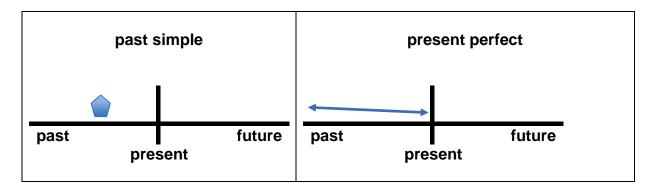
You are working at the Information Desk on the ground floor at the entrance of the hospital. Someone is asking you for directions to the department where she is due to have an X-ray. Her English is not that good, so you will need to explain and repeat information when she asks you to clarify.

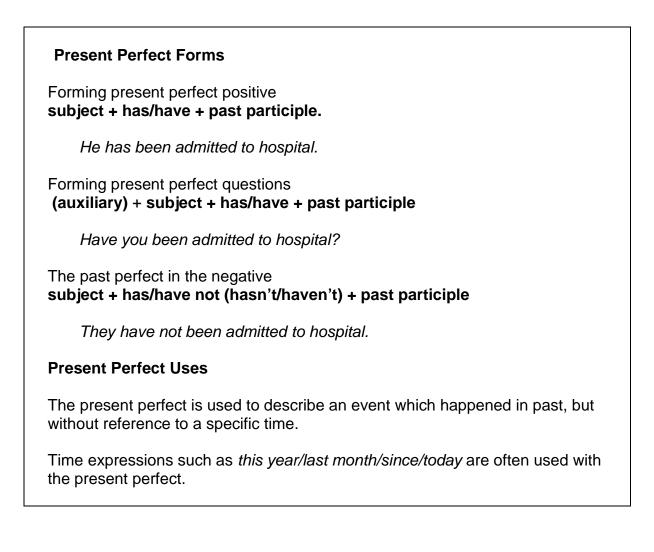
### Scenario 2:

You are a nurse who has been asked to show a small group of high school students who are thinking of studying nursing, around the hospital. You will meet them at the Entrance, and introduce yourself, and then guide them around the hospital (or a part of it). Be sure to use accurate medical language to explain to them about the different departments and where they are in relation to each other (left, right, next to, upstairs etc). Also, be ready to answer their questions.

# 7.2 Grammar for Present Perfect and Past Simple

1. Explain the difference between the past simple tense and the present perfect tense to another student.





Tense	Positive	Negative	Question
Present Simple	The nurse comforts the patient.		
Past Simple		The doctor didn't operate on him.	
Present Perfect			Have we been tested for COVID?

- 3. Scan the article below. Choose the best title for text from the options below. Write the title in the space provided at the top of the article.
  - a. Health Service for Coronavirus in Royal Liverpool Hospital
  - b. Coronavirus Medical Care in Royal Liverpool Hospital
  - c. Coronavirus: Royal Liverpool Hospital opens Unit

.....

# Part of the new £335m Royal Liverpool Hospital will open earlier to help patients recover from Covid-19.

On Monday 25 patients will transfer to a "step-down" unit where mostly older people will be helped to **regain** their independence before being discharged. Ultimately, up to 65 patients will be cared for by a 130-strong team of medical, nursing and **therapy** staff.

The hospital was due to open in March 2017 but has been beset by problems, <u>delaying its full opening until 2022</u>. Carillion **collapsed** in 2018 and building work on the hospital ground to a halt in February last year.

'Amazing achievement'

The building was found to have major structural flaws with three out of its 11 floors requiring strengthening.

Chief executive Steve Warburton said the new unit did not mean the rest of the new 646-bed hospital would open early, although the unit could be expanded if needed. He said: "Our construction partners and suppliers have worked quickly to create this fantastic facility, but equally our staff have demonstrated their ingenuity and innovation to plan the way in which they'll give our patients the best possible care.

"It's an amazing achievement to have created this unit in such a short time, and we're very grateful to everyone involved. "The unit, consisting entirely of single-bed rooms, has been created in what will become the Acute Medical Unit. Patients from the Royal Liverpool University Hospital or Aintree University Hospital will be transferred to the unit to support their recovery. Most of the patients will be older people, who will then be returned to nursing homes, care homes or their own home.<sup>8</sup>

4. Pronounce these words after your teacher. Then, identify the meaning of each word by choosing the most appropriate definition below according to the text.

	regain	verb	/rɪˈɡeɪn/
	0 0		especially an ability or a quality place that you have left
	therapy	noun	/'θerəpi/
a.	the treatment of menta	l illness by discussir	g patient's childhood
b.	the treatment of a phys	sical problem or an il	Iness
	collapsed	adjective	/kəˈlæpst/

- a. having fallen down or in suddenly, often after breaking apart
- b. having failed suddenly or completely 9

<sup>8</sup> BBC. (2020). Coronavirus: Royal Liverpool Hospital opens unit. Retrieved from https://www.bbc.com/news/uk-england-merseyside-52483971

<sup>9</sup> Oxford University Press. (2020). Oxford Learners Dictionary. Retrieved fromhttps://www.oxfordlearnersdictionaries.com/

- 5. Complete the sentences below using Present Perfect tense or Past Simple tense by circling the correct option. Check your answers with another student.
  - a. The hospital ... (has been beset/was beset) by problems in March 2017.
  - b. Chief executive Steve Warburton said, "Our construction partners and suppliers (*have worked/worked*) quickly to create this fantastic facility".
  - c. The hospital (has been/was) due to open in March 2017.
  - d. The new unit (*did not mean/has not meant*) the rest of the new 646-bed hospital would open early, although the unit could be expanded if needed.
  - e. The unit, consisting entirely of single-bed rooms, (*has been created/created*) in what will become the Acute Medical Unit.
- 6. Choose the correct answer below by circling True (T) or False \(F) according to the text. Check your answers with another student.

a. The hospital will open in 2022 .	Т	F
b. Carillion failed in 2018 and construction of the hospital ceased.	Т	F
c. If required, the "step down" unit could be enlarged in the future.	Т	F
d. The "step down" facility will house only elderly people.	Т	F

7. Match each verb below with the correct definition.

a. strengthen	i.	to move locations
b. expand	ii.	to become greater in size, number or importance
c. demonstrate	iii.	to come or go back from one place to another
d. transfer	iv.	to show something clearly by offering evidence
e. return	v.	to become more powerful or effective

8. Write 5 sentences using the verbs from the previous exercise in the present perfect tense.

a. b. c. d. e.

9. Write a short set of discharge notes describing the medical treatment of a patient.

Your notes should include reasons for admission, recent treatment and medications prescribed. Include sentences using either the present simple or present perfect tense.

# 7.3 Vocabulary to Talk about Nursing Roles

1. Read the following text. Underline the words indicating nurse activities. The first one has been done for you.

### A Day in the Life of a Nurse

Nurses are highly trained members of medical staff. They use their knowledge and skill sets to support patients through operations and procedures, develop treatment plans and offer advice on outpatient care. Most nurses have a varied schedule so a day in the life of a nurse can include a wide range of duties.

Nurses work as part of a team of frontline healthcare professionals who diagnose and treat patients in various settings. Nurses work with multidisciplinary teams including surgeons, physicians, specialists, assistants, technicians and other healthcare providers. Their daily duties may include different tasks including taking patients' vital signs, measurements, and medical histories. In another time, they can ask about the patient's symptoms, perform physical examinations, or draw blood samples. Other activities are like conducting diagnostic tests. Further, the nurses possibly recommend care options to physicians, administer medication, or maintain accurate and detailed records. If necessary, they consult with other healthcare providers or educate patients on how to manage their conditions. Providing emotional support to patients and their families is another task.

Moreover, they implement and assess care plans or recommend sources of support for patients. For certain occasions, they share relevant patient information at shift change such as admissions, discharges, and changes in patient's conditions, set up treatment rooms. Parts of what they may do are sanitizing and assembling medical equipment. Further, they may check and count medication, assess patients and administer wound care and change dressings. <sup>10</sup>

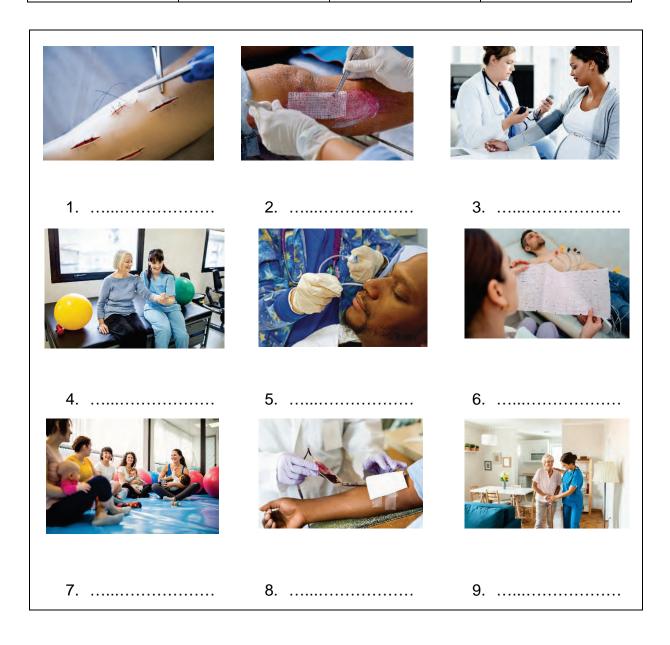
<sup>10</sup>Indeed Career Guide. (2020). A Day in the Life of a Nurse: Typical Daily Activities and Duties of a RN. Retrieved from https://www.indeed.com/career-advice/finding-a-job/day-in-the-life-of-a-nurse

2. Write 10 activities nurses may do at a hospital.

a.	take patient's vital signs
b.	
i.	
j.	

3. In pairs, match the nursing activity with the pictures below.

a. antenatal care	b. hecting	c. wound care	d. ROM
e. withdrawing fluid	f. diagnosing symptoms	g. pre-conference	h. breastfeeding
i. blood transfusion	j. performing ECG	k. foot care	I. emotionally supporting



4. Look at Question 3 again. Where do nurses do these activities? Write the possible places from the table below.

emergency department	hospital ward	maternity polyclinic	ICU
nurse station	operating and surgery room	cardiac ward	general polyclinic

## Nurse activities

#### Rooms

a.	 
b.	 
C.	 
d.	 
e.	 
f.	 
g.	 
h.	 
i.	 
j.	 

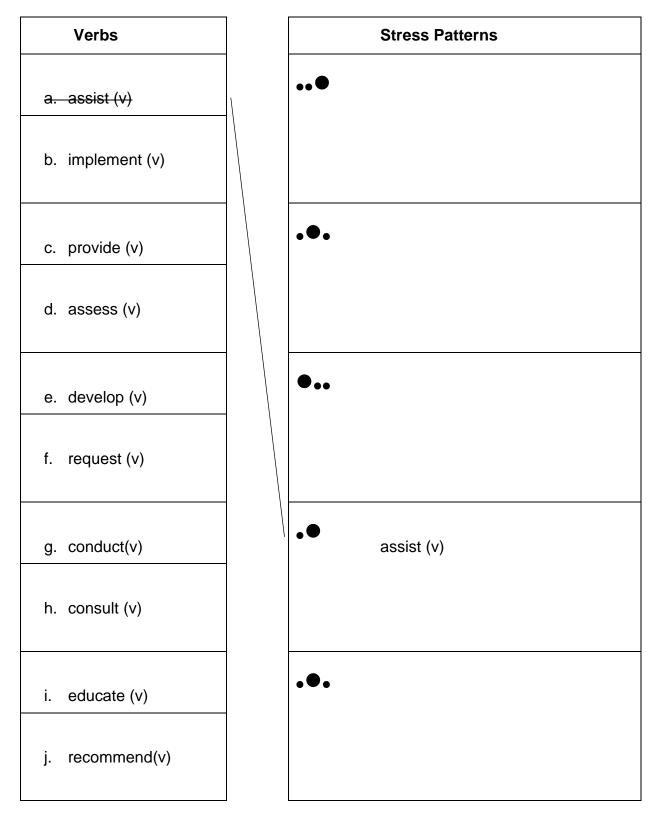
5. Study how the words above are pronounced. Your teacher will say each word and you will repeat each word after your teacher.

Words	Pronunciation
1. assess (v)	a. /əˈses/
2. suction (n)	b. / sʌkʃn /
3. wound care (n)	c. / wuːnd ker /
4. antenatal care (n)	d. /ænti'neɪtl ker/
5. nurse station (n)	e. / nɜːrs ˈsteɪʃn /
6. ward (n)	f. / wɔːrd /
7. polyclinic (n)	g. /ˈpɑːliklɪnɪk/
8. surgery room (n)	h. /ˈsɜːrdʒəri ruːm/

6. Go to the reading text 'A Day in the Life of a Nurse'. In the table below, list <u>5 or 6</u> <u>nouns</u>, adjectives, and verbs and their meanings.

Nouns	Meanings
Nurse	a person trained to care for the sick, especially in a hospital
Adjectives	Meanings
Verbs	Meanings

7. With a partner, match the verbs below to one of the 5 possible stress patterns. Once completed, confirm your answer by checking a dictionary.



8 Complete the sentences with the verbs below. You can use each verb <u>once</u> only. Remember to conjugate the verb for each sentence.

take insert draw dispose monitor
----------------------------------

- a. The nurse ...... the patient's heart rate regularly.
- b. "I need to ...... your vital signs to make sure that your temperature, pulse, respiration and blood pressure are okay," said the nurse.
- c. It is necessary to ..... blood from patients in a manner in which it does not cause them any pain or complication.
- d. Gently and quickly ..... the needle into the chosen vein with a smooth motion.
- e. ..... of the used needle immediately after using it on the patient.
- 9 Using the verbs from Exercise 8, write 5 of your own sentences to describe hospital activities. Each sentence must have <u>at least 15 words</u> in it. The first one has been done as an example
  - a. The nurse is taking care of the patient in the ward by *monitoring* his blood pressure.
  - b. ..... c. ...... d. ..... e. ....

- 10 On your own, write a short paragraph to describe a nurse's usual daily activities in a certain part of a hospital, for example, a surgical ward, operation theater or nurse's station.
- 11 Use at least 10 verbs to explain the nurse's activities in your paragraph. Write in the present tense. Check your spelling, grammar and punctuations carefully writing a minimum of 100 words.

 Introduction to the Hospital

# 7.4 Read about a Nursing Career

1. Discuss the pictures with a partner and decide which specialised field the nurses are in from the choices below. Write the correct answers under each image.

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geriatric nurse	intensive care nurse	theatre nurse
paediatric nurse	flight nurse	neonatal nurse



2. Listen to your teacher say each of these words and repeat.

occupation (n)	<i>bound (to) (adj)</i>
/ˌɒk.jəˈpeɪ.ʃən/	/baʊnd/
field (n)	passionate ( <i>adj)</i>
/fiːld/	/ˈpæʃ.ən.ət/

3. Match the words in column A with the meaning in the column B, without the use of a dictionary.

А

- 1. occupation
- 2. bound (to)
- 3. field
- 4. passionate

В
a. having very strong feelings or emotions
b. an area of activity or interest
c. certain, most likely to
d. a person's job

- 4. Choose the best title for the following article. Write the title in the space provided at the top of the text.
  - a. Nursing Occupations
  - b. Which Nursing Career is Right for You?
  - c. Great Careers in Nursing

Nursing is the fastest-growing occupation in the United States, due to factors such as an aging population and a high demand for nurses. With so many specialties to choose from within the nursing field, you're bound to find a specialty you'll be interested in. Choosing a career in the nursing field will be the right fit for you as long as you're passionate about helping people.

#### Neonatal Care

Neonatal nursing involves caring for new-born infants born with a variety of problems, including prematurity, birth defects, infection, cardiac malformations, and surgical problems. As a neonatal nurse, you may work in a hospital, but you can also expect to work in the community, providing home care or follow-up for high-risk patients.

<u>LPN</u> A licensed practical nurse cares for those who are sick, injured, convalescent, or disabled. Being a licensed practical nurse requires you to perform a variety of daily tasks, ranging from dressing wounds to feeding infants. LPNs are in high demand and will grow 22% by 2020.

#### Holistic Nurse

As defined by the American Holistic Nurses' Association, holistic nursing is the art and science of caring for the whole person. This practice recognizes the totality of the human being -- caring about the patient's relationships, spirituality, and overall well-being.

#### Occupational-Health Nursing

As an occupational health nurse, you provide for and deliver health and safety programs and services to workers, worker populations and community groups in order to identify health and safety needs in the workplace. It is typically a Monday through Friday job, but may vary depending on your work environment, position and responsibilities.

#### Travel Nursing

Travel nurses fill in during shortages at hospitals and facilities. When full-time nurses need a break, agencies pay for your living expenses to work on assignments that typically last between 8-13 weeks in different parts of the country.

#### Nurse Informatics Specialist

Nurse informatics specialists are at the forefront of changing technology in the medical world, using their technical skills to setup and maintain hospital networks. <sup>11</sup>

5. Choose the right answer by circling True or False based on information in the text.

a.	Demand for nursing is growing in the UK, due to an ageing	Т	F
	population.		
b.	Neonatal nurses are able to work in more than one location.	т	F
C.	The demand for LPNs grew 22% in 2020.	т	F
d.	Occupational-Health Nursing generally has regular hours.	Т	F
e.	A travel nurse fills temporary vacancies in hospitals.	Т	F

6. Write sentences of your own, related to the subject of nursing, using the vocabulary below. All of these words can be found in your text in Exercise 5.

a.	occupation (n)	
b.	passionate (adj)	
C.	caring (adj)	
d.	hospital (n)	

<sup>11</sup> Dressamed. (2016). What Nursing Career Is Right For You? Retrieved from https://vimeo.com/172148007

e.	population (n)	
f.	demand (n)	
g.	career (n)	
h.	provide (v)	

7. Discuss with a partner or in a small group which area of nursing interests you the most and why? Share your ideas with the class.



# 7.5 Writing a Reflection

1. With a partner, brainstorm the different types of nurses that work in healthcare. Compare your answers with another pair. How many types of nursing careers can you list?

2. Scan the text "Nursing in Today's World' and rank these nursing jobs from highest to lowest.

- a. Nursing officers .....
- b. Auxiliary nurses.....
- c. Student nurses.....
- d. Staff nurse.....
- e. Charge nurse.....

# Nursing in Today's World

Nowadays nursing is a career with a three-or four-year training, qualifications, grades, unions and pensions. In some Western countries, every nurse is on a grade. The grade depends on the nurse's experience and skills, and each grade has different responsibilities and pay.

On the bottom grade are unqualified auxiliary nurses who do the routine work in the hospital wards. On the top grades are nursing officers, who are usually administrators. Auxiliary nurses are on the bottom grades, but student nurses get the lowest pay. However, students don't stay at the bottom of the pay scale forever. When they qualify, they start working on a middle grade. As they gain more experience, they can get promoted and move up the ranks to become a staff nurse, then sister or charge nurse and perhaps eventually a nursing officer.

Many nurses work shifts, and they often work overtime to earn additional income. After their basic training, many nurses choose to do further study and become specialists in a particular field or area. Nurses can in fact specialize in many different fields. For example, they can become triage nurses working in Emergency Departments or psychiatric nurses who treat the mentally ill. There are also health visitors who visit patients in their own homes, practice nurses working in GP surgeries and also midwives who deliver babies.

Many nurses say they do not get enough pay and respect for the work they do. They say that the work is physically and mentally demanding and that they work long hours and get very tired. However, nurses will also say that there are many great rewards which have nothing to do with money and that nursing is an incredibly satisfying career. <sup>12</sup>

 $^{12}$  Grice, T. (2007). Nursing. Oxford University Press: Oxford.

3. Read the article again and decide if these sentences are true (T) or false (F).

a. The more responsibility you have, the higher your g	rade. T/F
b. Nursing officers are the same as auxiliary nurses.	T / F
c. Students are paid less than auxiliary nurses.	T / F
d. Many nurses say that the job is rewarding, but the p	oay is low. T / F

## 4. Look at the sentence starters in the box below.

Take turns to choose one of the sentence starters and complete the sentence about yourself. Try to add as much detail as you can. Take turns to ask follow-up questions and keep each other talking. Keep going until all the sentence starters have been used.

One day, I hope	The subject I'm studying at the moment that I like the most is	I want to be a nurse because
In the future, I'd like to	What I really enjoy about	The hardest aspect of nursing is
I'm particularly interested in	What I think is most rewarding about a career in nursing is	Next year, I
An area of nursing I'm wouldn't like to	An area of nursing I'd be interested in is	What I think I'm really good at is

## 5. Write 3 paragraphs related to your dream of having a career in nursing.

Follow the suggested plan below.

Paragraph 1:	Explain why you aspire to be a nurse and outline the qualities which you believe make you suitable for a nursing career.
Paragraph 2:	Describe the area of nursing which interests you, and why. Explain how you are suited to this field of nursing.
Paragraph 3:	Outline the studies you will need to undertake in order to qualify in this field. How many years will it take?

Swap your writing with other students and read their work. Is it similar or different to your writing?


Introduction to the Hospital

# **8.1 Language for Giving Instructions and Commands**

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1. Look at the following pictures. With your partner, identify the items a nurse may use when treating a patient.



What other equipment or instruments do nurses use when working? Make a list.

#### 2. Read the following dialogue between nurses.

Laura is a head nurse in a surgical ward. In every morning shift, she leads the morning meeting with her teams (night shift and morning shift) at 07.00 AM. Today, they will be discussing 3 patients.

- Laura: Good morning team, how about our patients last night?
- Sarah: In total, I am taking charge of 2 patients staying in room 1, but I am going to report one specific patient that is Mr. June. He is in his post-surgery period for his right leg or femur dextra. Today is his 3rd day in this ward, I have reported his condition to Dr. Shinta and we have agreed on applying a further activity treatment for him, so we will train him to sit on the bed and any other possible mobility for the patient.
- Laura: Thank you, Sarah, and how about your patient, Jack?
- Jack: I have 2 patients last night, the patient Mr. Abraham in the 2<sup>nd</sup> room still has fever 39.5°C since last night and the patient Mr. Moore, being diagnosed with lung cancer stage 3, he stays in the 3<sup>rd</sup> room, he told me that he feels nauseated and couldn't finish his meal.
- Laura: OK, I please contact and discuss further with the physiotherapy to handle the patient in room 1, Mr. June. And according to his medical record, he should get wound care this morning. Ingrid, please take care of the patient in the 1<sup>st</sup> room for the wound care and call the physiotherapist.
- Ingrid: OK Laura, I will handle patients in the 1<sup>st</sup> room. I plan to finish wound care for him around 9 Am so I think the physiotherapist can work with him at 10 AM. How about that?
- Laura: OK, that sounds good. For the 2<sup>nd</sup> room patient, is it the time for laboratory check? **Please ask laboratory staff to withdraw blood for the routine hematology (blood) test.** Rico, I hand over this patient to you. For the last patient, Mr. Moore he is with lung cancer and hasn't been eating very well for the last 3 days after his chemotherapy, it's time to get his blood test as well and call the nutritionist for nutrition treatment. Later we will observe and see whether or not he's ready for the radiotherapy. Vina, I hand over the last patient to you!
- Vina: OK Sarah. I will ask the laboratory staff to withdraw these 2 patients' blood this morning. I will call the laboratory staff at 08.00 AM and the nutritionist, too.

Laura: Thank you, team, for this morning's meeting. Take a rest for the night shift and do your best for your morning shift.

- 3. Discuss these questions in pairs.
  - a. Who leads the meeting?
  - b. Whose patient is the one in the first room?
  - c. Does Jack have a patient with an eating problem and wound?
  - d. What will Nurse Vina do?
  - e. What equipment does every nurse need?
- 4. Reread the text and match the nurse with the patients he/she takes care and their recent health conditions as below

leg surgery	nauseated	could not finish the food
needs blood check	wound care	suggested physiotherapy

Nurse	Patients	Health Conditions
Sarah		
Ingrid		
Jack		
Vina		

5. Study the language expressions below to give instructions and commands.

# The following sentences taken from the above conversation among nurses are examples of giving instructions and commands

- a. Ingrid, please handle the patient in the 1<sup>st</sup> room and call the physiotherapist.
- b. Please ask laboratory staff to handle it.

## To give commands and instructions, we often use an imperative

- a. Wash your hand before performing medical procedures.
- b. Wear your mask well.
- c. Do not forget to check her blood pressure before leaving the ward.

### There are a number of ways to make instructions sound more polite.

We can add please at the end of what we say or before what we say.

- a. Ask Max to sign this form and then send it off immediately please, Gwyn.
- b. Please tell the patient's family to observe how Devi eats her breakfast.
- c. Please report her progress immediately.

### We can use an introductory phrase to soften the order/command.

For example, using a phrase instead of using an imperative. Here are some common ways of phrasing an order, in order of the most indirect to the most direct:

Would you mind possibly... (+ *ing*) (Most indirect)

Would you mind possibly moving the patient now? She is starting to look uncomfortable.

I was hoping you could ... (+ infinitive without to)

I was hoping you could spare me a few minutes this morning.

Do you think you could ... (+ infinitive without to)

Do you think you could do this photocopying for me?

If you have a couple of minutes spare...

If you have a couple of minutes spare, the office needs tidying up.

I'd like you to...

I'd like you to file this correspondence for me.

I want you to...

I want you to finish this by tomorrow. (Most direct)

- 6. Read the language expressions to give instructions and commands. Repeat and check with your partner.
  - a. Would you mind possibly... (+ *ing*) (Most indirect) Would you mind possibly moving the patient now? She looks uncomfortable.
  - b. I was hoping you could ... (+ *infinitive without to*)I was hoping you could spare me a few minutes this morning.
  - c. Do you think you could ... (+ *infinitive without to*) Do you think you could do this photocopying for me?
  - d. If you have a couple of minutes spare...If you have a couple of minutes spare, the office needs tidying up.
  - e. I'd like you to... I want you to finish this by tomorrow.

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7. Read the short dialogues below. With a partner, choose instructions or commands for each example.

Head Nurse Linda	
Nurse Jackie	Sure, I'll check the vital signs of the patient in the 1 <sup>st</sup> room now.
Nurse Ingrid	
Patient 1	I have been feeling better this morning. Thank you.
Nurse Ingrid	I want you to
Head Nurse Linda:	I'm still waiting for another progress report by Dr Kennedy. Can you wait for it?
Nurse Laura	
Nurse Vina	Sorry, I can't do it right now because I'm going to assist the patient in postpartum care. I'll give you the list right after that.

- 8. In pairs or small groups, write your own dialogues giving instructions and commands in the contexts below.
  - a. In a patient ward
  - b. In a surgical ward
  - c. In a nurse station

Introduction to the Hospital English for Nursing 1

# 8.2 Grammar for the Zero and First Conditional

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1. Think about the following questions. List what happens if each circumstance takes place. Check your answer with a partner.

If people always consume healthy food, .....

they are healthy.

they will not spend much money at the hospital.

If patients suffer from diabetes type 1, .....

they need insulin injections.

they will regularly check their condition at the hospital.

2. Read the following text between Nurse Anisa and a patient named Danar on your own. Then read it out loud in pairs.

Danar:	Nurse, I think I might have a fever. It's so cold in here!
Nurse:	Here, let me check your forehead.
Danar:	What do you think?
Nurse:	You feel a bit warm, right?
Danar:	Yes.
Numero	If you fool a hit warm now. I need a thormometer to shook
Nurse:	If you feel a bit warm now, I need a thermometer to check.
Danar:	How do I raise my bed? I can't find the controls.
	•
Danar:	How do I raise my bed? I can't find the controls.
Danar: Nurse:	How do I raise my bed? I can't find the controls. Here you are. Is that better?

# If you can't rest well, I will definitely get you something else. No, thank you.

Danar:

Nurse: OK, I'll be right back with the thermometer. Danar: Oh, just a moment. Can you bring me another bottle of water, too? Nurse: Certainly, I'll be back in a moment. Nurse: (coming in the room) I'm back. Here's your bottle of water. If you feel very thirsty, you drink the water before I put the thermometer under your tongue. Danar: Yes. (drinking the water) Nurse: Please put the thermometer under your tongue now. Danar: Thank you. (puts the thermometer under the tongue) Nurse: Yes, you have a slight fever. I think I'll take your blood pressure as well. Danar: Is there anything to worry about? Nurse: No, no. Everything's fine. It's normal to have a bit of fever after an operation like yours. The doctor will discharge you soon if your condition improves gradually. Danar: I'm so glad that everything went well, and I hope that I can be discharged soon. Nurse: You're in good hands here! If you need more assistance, we are ready to help.

3. Review the following explanations for the Zero and First Conditional Sentences.

### Zero and First Conditional Sentence

#### Examples of conditional sentences from the above dialogues

- 1. If you feel a bit warm now, I need a thermometer to check.
- 2. If you can't rest well, I will definitely get you something else.
- 3. If you feel very thirsty, you drink the water before I put the thermometer under your tongue.
- 4. If you need more assistance, we are ready to help.
- 5. The doctor will discharge you soon if your condition improves gradually.

What number belong to zero conditional and what number belong to first conditional?

#### Use the following explanation to answer the above question.

All conditional sentences talk about a result that is dependent on a condition. The sentences, therefore, have two parts, or clauses. In English, we use the word "if" to determine the condition in the first clause, and the result (which depends on the condition) in the other clause.

There are different types of conditionals, and in this unit zero conditionals, and first conditionals are studied. We use these structures depending on how probable the condition and its result are. See the table below for a rough guide.

Туре	Tenses in the two clauses	Probability condition will happen
Zero conditional	[lf + present], + [present]	100% – will always happen.*
1st conditional	[lf + present], + [will]	50%-90%- will probably happen.
*For zero conditional, <b>when</b> can be used to replace <b>if</b> .		

4. In pairs, decide if the sentences below are written as zero conditional sentences or first conditional sentences. Write Z for zero conditional sentences, write F for first conditional sentences. Share your answers with other students.

	Sentence	Zero /First Conditional
1.	If it rains, we'll get wet.	
2.	If it rains, I will not go to the clinic for my routine check-up.	
3.	If I eat more cheeseburgers, I will be sick.	
4.	If you don't have money, you can't buy anything.	
5.	If the temperature is below 0 Celsius, water freezes.	
6.	If I get sick, I will not attend my therapy session.	
7.	If today is Friday, tomorrow is Saturday.	
8.	If you come to my office, I will introduce you to my co- workers.	
9.	They will give you herbal medicine if you don't like the medicine your doctor prescribed yesterday.	
10.	Your parents will see the family doctor if they have problems with their health.	

- 5. Continue the sentences below using correct zero conditional.
  - a. If you eat fast food, .....
  - b. If you work well with other nurses, .....
  - c. When I work in a morning shift, .....
  - d. I always wash my hands if.....
  - e. When the patients show their improvement, .....

- 6. Continue the sentences below using correct first conditional.
  - a. If I meet Nurse Melati this afternoon,

b. If my night shift ends early,
c. The doctors will prescribe you another asthma medicine if
d. I will lend you my key if .....
e. She will not get better if.

7. Read the following dialogues between a nurse and a patient. Complete the missing information using the correct conditional form.

#### **Conversation 1**

Nurse	Now, hold on. I'm sure you'll be alright if you(listen)
	to your mother
Kid	I want to see my friends. I miss them.
Nurse	I know. I'm sure they miss you too. But you need to stay for a
	while here if you want(be) healthy again You can't
	rush, or you might break your leg again.
Kid	How long will I use these crutches?
Nurse	It(not be) long if you listen to my advice.
Kid	Can I play with my ball again?
Nurse	Sure. So, promise me?
Kid	(no verbal response given)
Nurse	Ok. goodbye.

#### **Conversation 2**

Mr.Sharma	Good morning, nurse.
Nurse	Good morning, Mr.Sharma. You look unwell again now.
	What's wrong with you? Did you sleep well last night?
Mr.Sharma	I didn't unfortunately. I have been suffering from fever since
	last night.

Nurse	If you have problems with your sleep again, you	
	(call) us. Okay? Do you have any other	
	symptoms?	
Mr.Sharma	Alright. I also feel headache and shivering.	
Nurse	Let me take your temperature. At this time, the fever is 102	
	degree. Don't worry. There is nothing serious with you. I will	
	give you the medicine prescribed by the doctor, and you will	
	be all right.	
Mr.Sharma	Thank you, nurse.	
Nurse	If your condition has no improvement, the doctor	
	(observe) your condition again	
	and(prescribe) you different medication.	

**8.** Use either zero or first conditional to give advice in each of the medical scenarios below. An example has been done for you.

Scenario	Advice
Dealing with patient's vomiting	If you vomit, contact your doctor.
Taking insulin injection	If you take insulin,
Delivering chemotherapy	
Asking the patient to lie down on the gurney	
Offering help	
Transferring a patient to a new ward	
Checking vital signs of a patient	
After drawing patient's blood	
Dealing with patient with low vision	

Explaining the medication taken by a patient	
Informing the patient's family about post- treatment undertaken by the patient	

9. In pairs, write a dialogue from one of the above scenarios using correct zero and/or first conditional sentences. Act it out in front of the class.



# 8.3 Read about Medical Equipment

- 1. Talk with your partner. How many pieces of medical equipment that you've had experience using can you name together?
- 2. Look at these pictures. Can you identify these items of medical equipment?



3. Scan the text and underline the vocabulary related to medical equipment. How many items are mentioned? Check your answers with your partner.

## Medical Equipment

When hearing the term 'medical equipment', a typical layman, whose only knowledge about health care comes from an annual check-up at a local surgery and TV shows such as 'House, M.D.' or 'ER', might think of complex devices like a defibrillator, the star of the show in every scene in which somebody's life is saved.

However, medical equipment might refer to both very complex devices used by professionals as well as to simple instruments which you might even use yourself. Let's see what equipment is used when you catch influenza.

Imagine you wake up in the morning with a terrible headache, feeling feverish. You quickly phone the boss and say you need a day off, then grab a thermometer to take your temperature. Gosh, it's 102 degrees Fahrenheit! You really need to go to the doctor. After you arrive at your local clinic and wait some time in a queue, the GP asks you in. She asks what is wrong and then puts a tongue depressor in your mouth to see your throat. Then she asks you to take off your sweater and uses a stethoscope to listen to your chest. Finally, she tells you that you have caught the flu, prescribes you some medicine and says you must stay at home for a couple of days.

As you can see, several pieces of equipment are used even in such a common procedure like diagnosing flu, some of which you may even have at home. What about other examples? Let's see what equipment might be used in case of a broken bone.

It's mid-February and you are skiing in the Rockies. You are having an amazing time, but you fall and feel terrible pain in both your shin and your arm. You have probably broken your arm and your leg! It's so painful you can't move so you call out mountain rescue. They come by chopper, put you on a stretcher, use a splint to immobilize your limbs and take you to the hospital. You are told you have broken

your leg and it's put in a cast. If you're lucky and your arm is not broken, it's only wrapped in bandage and you have to wear a sling. As a result, walking on crutches is out of the question, so you leave the hospital in a wheelchair. But how do the doctors make sure your limb is broken or not? Well, you have an X-ray taken.

What other gear is used in hospitals? Let's study a case of a person brought to an A&E department with a head injury. The person is brought by paramedics, who have already put a brace on his or her neck in order to prevent further injury. Firstly, diagnostic equipment is put to use in order to check the person's condition.

An MRI scan is taken to check for bleeding and swelling in the brain. If immediate surgery is required, the patient is administered an anesthetic by means of a syringe. Then a surgeon uses a scalpel to cut into his or her body and forceps to manipulate the tissues. After the surgery is performed, a catheter is inserted for the time when he or she is immobilized.

Various types of medical equipment, ranging from basic tools to highly advanced cutting-edge devices, are used in very different situations. One thing is certain - each piece has been developed to help us recover or even save our lives. And we might need them at the very beginning of our lives - as is the case with an incubator, which is used in neonatal units to help or treat prematurely born children.

4. Match the following words from the text with their definitions. After checking with your partner, your teacher will say each word. Repeat each word together.

Words	Definition
<ol> <li>thermometer /θəˈmɒm.ɪ.tər/</li> </ol>	<ul> <li>a small piece of wood used by</li> <li>a doctor to hold someone's tongue down</li> <li>in order to examine their mouth or throat</li> </ul>
2. tongue depressor /ˈtʌŋ dɪˌpres.ər/	b. a device used for measuring temperature, esp. of the air or in a person's body
3. stethoscope /ˈsteθ.ə.skəʊp/	c. a long, firm object used as a support for a broken bone so that the bone stays in a particular position while it heals:
4. stretcher / /ˈstretʃ.ər/	<ul> <li>d. a piece of medical equipment that doctors use to listen to your heart and lungs</li> </ul>
5. splint /splɪnt/	<ul> <li>a light frame made from two long poles with a cover of soft material stretched between them, used for carrying people who are ill, injured, or dead.</li> </ul>

Read the text again and answer the following True/False questions according to the 5. text.

a. A thermometer is used for measuring your body temperature.	T/F
b. The doctor listens to your chest by using a stethoscope.	T / F
c. An MRI scan is taken to check for the function of the brain.	T / F
d. A tongue depressor is used to see your tongue.	T/F
<ul> <li>When you have broken on your limbs, a splint is used to immobilize it.</li> </ul>	T / F

- 6. Answer the following questions.
  - a. What medical equipment is used when someone gets influenza?
  - b. How would a nurse help a patient with a broken leg?
- 7. Tell your partner about an experience you've had using medical equipment during your clinical practice. Tell them what the situation was and why you had to use it. Give as much detail as you can.

# 8.4 Read about Items New Nurses Should Have in Their Bag

1. In pairs, label each picture correctly. Use the given words in the box.

		Admund of MEDICAL- SURGICAL SURGICAL SURGICAL NURSING CARE
1	1	1
1	1	1

thermometer (n) /θəˈmɒm.ɪ.tər/	reference book (n) /ˈref.ər.əns ˌbʊk/	micropore medical tape (n) /ˈmed.ɪ.kəl teɪp/
blood pressure apparatus (n) /ˈblʌd ˌpreʃ.ər ˌæp.əˈreɪ.təs/	tongue depressor (n) /ˈtʌŋ dɪˌpres.ər/	torniquet (n) /ˈtʊə.nɪ.keɪ/

2. Read the following text entitled "14 Items That New Nurses Should Have in Their Bag". What is the most frequently used equipment by new nurse?

## 14 Items That New Nurses Should Have in Their Bag

If you are a nursing student or new nurse, you are probably wondering what you will need in your work bag. Aside from your personal stuff, what are the things you bring that signifies you are a nurse?

These nursing supplies listed below are a must if you want to do your job efficiently. The most common supplies nurses have in their bags are:

#### 1. Stethoscope

This is one of the most important tools of the trade. Nurses use this tool to listen to things such as the heart, veins, and intestines to make sure proper function. According to Best Stethoscope Reviews, here are the 6 best stethoscopes to buy. As you surely know, it's one of the most important tools for a patient's assessment.

One of today's leading stethoscope brands is Littmann. You can choose from the classic style to the most advanced kind.

#### 2. Books

A handy reference listing down common medicines and conditions. MIMS provides information on prescription and generic drugs, clinical guidelines, and patient advice. Nurses can also use Swearingen's Manual of Medical-Surgical Nursing, a complete guide to providing optimal patient care.

## 3. Scissors and Micropore Medical Tape

Bandage scissors are used for cutting medical gauze, dressings, bandages and others. Nurses need to have these in their pockets for emergency use, especially for wound care. Micropore tape is also important and should be readily available, for example, when your patient accidentally pulls his/her IV.

## 4. Lotion and Hand Sanitizer

Nurses never forget to wash their hands several times throughout the day, leaving their skin dry. That's why having lotion in their bags is important to keep the skin in good condition. Meanwhile, the sanitizer helps nurses steer clear of germs, along with other contagious agents.

- a. Six saline flushes
- b. Retractable pens
- c. Sanitary items gauze, sterilized mask and gloves, cotton balls
- d. OTC pharmacy items (cold medicines, ibuprofen)
- e. Small notebook for taking notes from observations of your patients.
- f. Thermometer
- g. Tongue depressor
- h. Tourniquet
- i. BP apparatus
- j. Watch with seconds hand

On Nurse Nacole's website, she shares that she carries a drug handbook, intravenous medications, makeup mirror, tape measure, towel, lotion, wipes, 4 in 1 pen and a homemade cheat sheet for her patients. Also, in Miss D Makeup's What's In My Work Bag Youtube video, she has a box of batteries, tapes, a pack of gum, toothbrush, sanitizer, coupons, snacks, umbrella, stethoscope, pens, folder of her report sheet and information sheet, tampons, charger, name tag, ID, makeup bag, eye drops, lotion, hair clips, highlighter, pen light, and journal.

## So, What's in My Bag?

In my bag, I have a 4-in-1 pen, a highlighter, IDs, bandage, journal to write some new information when I surf the net, my phone with medical e-books and medical dictionary in it, and other stuff like alcohol, sanitizer, over-the-counter meds (such as paracetamol, cold medicine, pain killers, multivitamins), eye drops, handkerchiefs, floss, toothbrush, nail file, band aids, and food.

Aside from my knowledge in providing quality patient care, I also bring things that can help me get through my shift. In an effort to make things more compact and easier for a nurse to get access to, most common nursing supplies are available in a portable kit. The size and styles are developing as new ways of making a nurse's shift easier.

These are just few of the essential nursing paraphernalia that a new nurse needs. <sup>13</sup>

Posted by Erica Bettencourt, By Rena Gapasin

- 3. Write the meaning of these words. Use a dictionary if you need to.
- efficiently (adv) a. b. prescription (n) guideline (n) c. d. advice (v) e. observation (n) f. shift (n) generic (adj g. h. readily (adv) i. essential (adj) j. signify (v)

4. Read the text again and answer the following questions.

	a.	What is stethoscope used for?
	b.	What does the word "leading" in paragraph 2-line 4 mean?
	с.	What does MIMS provide?
	d.	Why do nurses need to have scissors and micropore medical tape in their pockets? Give example.
	е.	Why are lotion and hand sanitizer important for nurses to have?
•••	• • • • •	

5. Work in a group of 3 and discuss the function and significance of each medical equipment below for nurses. Write your answer in the given boxes.

	Medical Equipment	Function & Significance
1	Six saline flushes	Function: Significance for nurse:
2	Retractable pens	Function: Significance for nurse:
3	Sanitary items	Function: Significance for nurse:
4	OTC pharmacy items	Function: Significance for nurse:
5	Small notebook	Function: Significance for nurse:

6	Thermometer	Function: Significance for nurse:
7	Tongue depressor	Function: Significance for nurse:
8	Tourniquet	Function: Significance for nurse:
9	BP apparatus	Function: Significance for nurse:
10	Watch with seconds hand	Function: Significance for nurse:

6. Work in pairs to read the following article. Answer the questions that follow the text and discuss in groups.

## Innovative Nursing Equipment

So, what do these new technological developments in nursing equipment consist of? There are a range of devices available to nursing teams, and all of these are important to know about.

#### Electronic patient records

Electronic patient records have been the norm in the healthcare sphere for some time now. These online systems allow healthcare professionals to access patient histories instantaneously, whilst tracking their progress and checking the results of tests. Learning about EPRs is a central part of <u>nurse training</u>.

#### Smart phone apps

Nursing apps are become increasingly important for nurses who work in busy healthcare settings. These can be put to a variety of uses, from contacting colleagues to checking information about medications and conditions. Nursing apps can act as alternatives to consulting books or senior members of staff every time a nurse is unsure of the next step. The <u>Nursco App</u> facilitates this with its senior nurse adviser service, where nurses can contact a professional for advice.

#### Non-invasive diagnostic and monitoring tools

One area of technology that is certainly improving patient experience is noninvasive diagnostic tools. These tools are used to help nurses evaluate patients, without having to use traditional methods such as probing and injecting. Not only does this make patients more comfortable, it also lowers the risk of infection, and often delivers more accurate results. Similarly, nurses can monitor their patients' condition wirelessly using chips and sensors that are integrated into beds and bedding. These chips are able to report on blood pressure, movement, weight and more during sleep. This extra element of observation is intended to help patients avoid things like bedsores and falls. Nurses will be alerted to changes in patients' status and able to act quickly.

#### **Medication trackers**

A key aim of technology in nursing is to reduce the margin for human error. Today, there are a range of medication trackers available, from ventilators that measure the precise amount of medicine inhaled, to implantable devices that administer medication depending on their prescribed dosages. This means that patients can recover without being disturbed by nurses unnecessarily – particularly valuable during sleep.

#### **Patient lifts**

For many nurses, the introduction of patient lifting machines to the ward will be a huge relief. Many facilities are adopting these machines to aid nurses in lifting patients from bed to bed – often a difficult task with heavier patients. This reduces a nurse's chance of injury, and also means that multiple nurses are not needed to simply move a patient, freeing them up for other more pressing tasks.

#### **Wireless Communication Systems**

Some healthcare settings are now implementing <u>wireless badges</u> or headsets to integrate the purposes of outdated technology such as phones and pagers into

one integrated piece of tech. These wireless devices may have 'smart' capabilities,

enabling them to automatically route calls about certain subjects or patients to specific nurses or use data from sensors and medical equipment to report patients' state. Not only do these devices reduce response times from colleagues, but they also alert healthcare professionals in case of an emergency, allowing nurses to act quickly. Often, this can have a dramatic effect on patient outcomes, especially in acute care wards.

#### **GPS** location services

GPS location services are vital for many nurses. Whereas once, nurses had to spend precious time searching for important nursing equipment, now, a chip or code embedded in the equipment allows them to pinpoint the location of the equipment via GPS. This also prevents equipment misuse, reducing funds being spent on repairs and replacements of vital equipment. This technology can also be used to protect patients suffering from mental illnesses or dementia. Integrated into a wristband or badge, electronic tracking can help nurses see where the patient is, and electronic borders can be set to alert caregivers if the patient goes outside a set area where they may be at risk<sup>14</sup>.

- a. What are electronic patient records used for?
- b. What are the benefits that a nurse gets in using smartphone apps?
- c. Why is it important for nurses to use noninvasive diagnostic and monitoring tools?
- d. What benefits do nurses get with chips installed in their patients' bed and bedding?
- e. Mention two types of medication trackers and their functions?

<sup>&</sup>lt;sup>14</sup> Nursco Healthcare. (2020). How tech is revolutionising nursing equipment. Retrieved from https://www.nursco.com/revolutionising-nursing-equipment/

7. Based on the text "Innovative Nursing Equipment" in Exercise 6, answer these questions with True (T), False (F) or Not Given (NG)

a.	Electronic Health Records access the patients' history immediately	T / F / NG
b.	Novice nurses can consult all nursing problems with the senior nurse by using nursing app	T / F / NG
C.	Technology that can be used by patients to invasive diagnoses tools	T / F / NG
d.	Machine precision is very useful for reducing human error especially in nursing field such as ventilator measurement	T / F / NG
e.	Patients lifting machine very useful for patients with long bed rest for the first mobilization	T / F / NG
f.	Wireless communication system important in acute and chronic phase	T / F / NG
g.	GPS can be used for tracking schizophrenia patients	T / F / NG

## Module 4

# The Nursing Process English for Nursing 1



# 9.1 Language for Requesting Personal Information

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- 1. Discuss the following questions with your partner.
  - a. Have you ever been to a hospital or clinic when you are sick?
  - b. What information do you need to provide when being admitted to hospital?
- 2. Read the dialogue between a nurse and a patient. Underline sentences which have a function of making requests, giving instructions or asking questions

Patient:	Good morning.
Nurse:	Good morning, <u>can I help you</u> ?
Patient:	I want to meet the doctor. I have felt dizzy for three days.
Nurse:	OK. Let me write your data. What is your name?
Patient:	I'm Alisha.
Nurse:	How old are you?
Patient:	22 years old.
Nurse:	What is your address please?
Patient:	17 Sudirman Street.
Nurse:	What is your phone number please?
Patient:	08187654321
Nurse:	Are you single?
Patient:	Yes, of course.
Nurse:	What do you do?
Patient:	I am a student in college.
Nurse:	Are you Muslim?
Patient:	Yes, I am.

Nurse:	Who is your next of kin?
Patient:	My father.
Nurse:	What is your father's name?
Patient:	Mr. Adam.
Nurse:	May I have your father's ID card?
Patient:	Sure, I will ask him (a few minutes later) Here, it is.
Nurse:	OK thank you, Ms. Alesha. You can wait in the waiting room.

3. Identify the function of the sentence below based on the dialogue above. Discuss your answers with your partner.

	Sentence	Function of the sentence
a.	Can I help you?	a question
b.	Let me write your data.	
C.	What is your address please?	
d.	Yes, of course.	
e.	Please wait in the waiting room and I will call you later.	

4. Listen to your teacher pronouncing the words in the conversation below. Practise the sentences in pairs.

Question	Statement
What is your name?	My name is Mrs Brown.
How old are you?	I am 32 years old.
What is your phone number please?	My number is 085-123-456-789
How do you feel?	I feel dizzy.
Do you have any allergies?	No actually.

- 5. Below is a dialogue between a nurse and a patient. With your partner, arrange these dialogue lines into logical order.
  - a. I am 20 years old.
  - b. How old are you?
  - c. I have a headache and a stomachache.
  - d. How do you feel?
  - e. I live in Mawar Street.
  - f. What is your name?
  - g. Where do you live?
  - h. No, I am married.
  - i. Your number please.
  - j. What do you do?
  - k. I am Olivia.
  - l. 081229911900.
  - m. Are you single?
  - n. What do you do?

Nurse:	Good afternoon. What is your name?
Patient:	
Nurse:	
Patient:	

Nurse:	
Patient:	
Nurse:	
Patient:	

6. Complete the conversation between a nurse and a patient who is being admitted to hospital. The patient wants to register for a medical checkup. The nurse asks for the name, address, marital status, next of kin and reason for contact.

Nurse:	Good afternoon, can I help you?
Patient:	
Nurse:	Is it the first time for you?
Patient:	Yes, of course.
Nurse:	
Patient:	My name is Johnson.
Nurse:	
Patient:	I live in Anggrek Street.
Nurse:	
Patient:	I am 15 years old.
Nurse:	
Patient:	My father. The name is Mr Ahmad.
Nurse:	OK, please wait until I call you.
Patient:	
Nurse:	You are welcome.

7. Imagine you have had a high fever for 2 days. You decide to go to the hospital to check your condition. Write a dialogue between yourself and a nurse, who on admission asks for your personal information. Check your dialogue with a partner and role play.

# 9.2 Grammar for Present Simple and Present Continuous

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1. Read the conversation below and answer the questions which follow.

Nurse Angel:	Good afternoon.
Nurse Anne:	Good afternoon.
Nurse Angel:	What are you doing?
Nurse Anne:	I am looking for a needle. Do you know where it is? I need to give a paracetamol injection to the patient in the Amanda Room. She has a fever of 41 degrees Celsius.
Nurse Angel:	Here it is.
Nurse Anne:	Oh, thank you. The patient needs a quick treatment to decrease their fever.
Nurse Angel:	How old is he?
Nurse Anne:	He's 65 years old.
Nurse Angel:	Does he feel out of breath?
Nurse Anne:	Yes, he feels quite out of breath.
Nurse Angel:	Have you given him an oxygen mask?
Nurse Anne:	No, but thank you for reminding me.

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- a. What is Nurse Anne doing?
- b. What happened to the patient?
- c. How old is the patient?
- d. Does he feel breathless?
- e. What is the solution for breathlessness?

- 2. Read the conversation again.
  - a. Can you identify a sentence which uses the present simple?
  - b. Can you identify a sentence which uses the present continuous?
  - c. Why do we use these tenses?
- 3. In which of the following situations would we use a) present simple and b) present continuous?
  - a. If we want to talk about a fixed habit or routine which usually doesn't change
  - b. If we talk about action which is happening now but will soon finish.
  - c. If we talk about a past event
- 4. With your partner, read the following sentences and choose the correct verb form. Together, discuss why your answer is correct.
  - a. Look! He leaves / is leaving the room.
  - b. Quiet please! I write / am writing a nursing report.
  - c. She usually **walks / is walking** to the hospital.
  - d. But look! Today Dr. James **goes / is going** by bike.
  - e. Every month, we **go / are going** to the hospital to have a medical checkup.
  - f. He often **goes / is going** to the physiotherapy clinic.
  - g. We **play / are playing** monopoly at the moment to reduce the patient's stress.
  - h. The child seldom **cries / is crying.**
  - i. I do not / am not doing anything at the moment.
  - j. Does he watch / is he watching the news regularly?

5. Complete each sentence below using either the present simple or present continuous.

Every morning, doctors and nurses ...... (go) to the hospital Every morning, doctors and nurses **<u>go</u>** to the hospital.

- a. Are you ..... (come) tonight?
- b. Does he ..... (eat) rice every day?
- c. I .....(work) at the moment.
- d. Does he .....(come) to hospital often?
- e. He ..... (play) tennis now.
- f. He .....(not/play) golf now.
- g. They ..... (go) to a physiotherapy clinic every Saturday.
- h. She ..... (not/go) the hospital very often.
- i. You usually ..... (arrive) late.
- j. He normally ..... (eat) dinner at home.
- k. Do you .....(study) every night?
- I. Do they ..... (work) late usually?
- m. I ..... (not/work) tonight.
- n. Is she .....(work) at the moment?
- o. Julie .....(sleep) now.
- 6. Please fill the blank with the appropriate verb tense

This is Mrs. Tata. She <u>is</u> (be) a nurse in PKU Hospital. She <u>lives</u> (live) in Indonesia and ...... (be) married to John. They ...... (have) three children. They all ...... (love) animals, but they...... (not, have) any pets because they....... (live) in apartment. Ms. White ...... (work) for an international hospital. However, she...... (not work) today, because she ...... (not feel) well. She has phoned in sick.

Dr. Brown's son, Arnold (not like) shopping but he	
(love) hanging out with his friends. They usually (go) to the	ne local
park where they (play) football and basketball. Today, ho	wever
(not play) football and basketball; he (skat	eboard)



# 9.3 Read about Taking Blood Pressure



1. Scan the article and decide which of the following statements is the most accurate about the text.

The purpose of this text is to...

- a. explain the meaning of blood pressure.
- b. give advice to patients about keeping healthy.
- c. explain how to take blood pressure with a manual device.
- d. discuss the importance of taking blood pressure readings.

#### **Taking Blood Pressure Manually**

Check the condition of the device and the cuff size to ensure the reading is accurate. A small hole or crack in any part of the device e.g., rubber tubing, bulb, valves, and cuff can lead to inaccurate results. A cuff that is too small or too big may produce an incorrect high blood pressure reading. It's important the patient feels comfortable and relaxed. Reassure the patient that there are no risks or complications associated with this screening.

Have the patient relax and sit with their arm slightly bent on the same level as their heart and resting comfortably on a table or other flat surface.

Place the inflatable blood pressure cuff securely on the upper arm (approximately one inch above the bend of the elbow). Make sure the cuff is touching the skin. You may have to ask your patient roll up their sleeve or remove their arm from the sleeve. Close the pressure valve on the rubber inflating bulb and pump the bulb rapidly to inflate the cuff. The cuff should be inflated so that the dial reads about 30 mm Hg higher than your patient's at-rest systolic pressure. (Tip: If at-rest pressure is unknown, inflate the cuff to 210 mm Hg or until the pulse at the wrist disappears).

If using a stethoscope, place the earpieces in your ears and the bell of the stethoscope over the artery, just below the cuff. If the cuff has a built-in stethoscope bell, be sure to position the cuff so the bell is over the artery. The accuracy of a blood pressure recording depends on the correct positioning of the stethoscope over the artery and making sure the stethoscope bell does not rub on the cuff or the patient's clothing.

Now slowly release the pressure by twisting or pressing open the pressure valve, located on the bulb. Some blood pressure devices can automatically control the rate at which the pressure falls, but generally the patient's pressure should decrease about 2 to 3 mm Hg per second. Listen through the stethoscope and note on the dial when you first start to hear a pulsing or tapping sound—this is the systolic blood pressure. If you have trouble hearing the start of the pulse, you can find the patient's systolic blood pressure by asking your patient to tell you when they can start to feel the pulse in their wrist and noting the level on the dial.

Continue letting the air out slowly. The pulsing or tapping sounds will become dulled and finally disappear. Note on the dial when the sounds completely stop—this is the diastolic blood pressure. Finally, release the remaining air to relieve all pressure on your patient's arm.

Suggest the patient write down their numbers along with the date and time. They can use the Team Up. Pressure Down. journal to keep track. Remind the patient to take their blood pressure regularly to ensure their medications are working appropriately<sup>1</sup>.

- 2. Read the passage again and answer the following questions. Check your answers with a partner.
  - 1. Where should the inflatable blood pressure cuff be fitted?
    - a. On the wrist.
    - b. On the upper arm.
    - c. In the bend of the elbow.
    - d. About an inch below the elbow.
    - 2. Which one of the following statements is true?
      - a. The cuff must be pumped to inflate the cuff.
      - b. The pressure valve must be closed before pumping starts.
      - c. The dial should read dial about 30 mm Hg.
      - d. The inflated bulb should cover the wrist.
    - 3. The accuracy of the blood pressure reading
      - a. Depends on using the stethoscope.
      - b. Is determined by the bell over the artery.
      - c. Making sure that the stethoscope bell does not touch anything.
      - d. Depends on the what the patient is wearing.
    - 4. A nurse can hear blood pressure by listening for a tapping sound. True/False?
    - 5. There is only one type of blood pressure. True/False?

<sup>&</sup>lt;sup>1</sup> Million Hearts. (2020). Hypertension Control. Retrieved from https://millionhearts.hhs.gov/files/HTN\_Change\_Package.pdf

3. Use the information from the text to complete the following summary. Insert 1, 2 or 3 words.

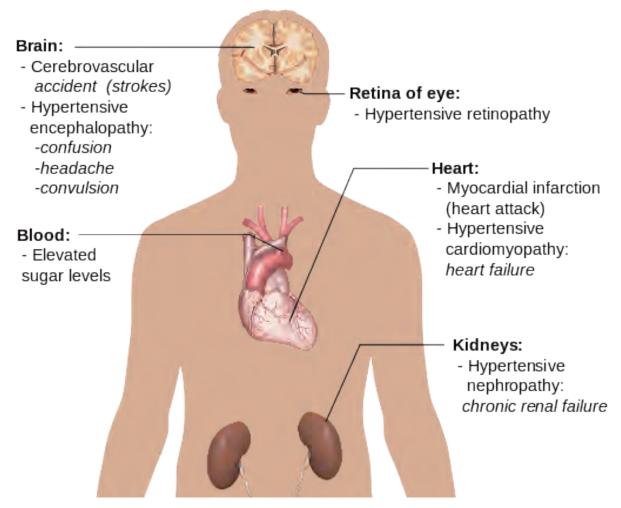
#### Taking Blood Pressure Manually

When taking a person's blood pressure, it is important to check that the condition of the device is a). ...., otherwise there could be an b) ..... in the patient's blood pressure reading. Additionally, it is necessary for practitioner to c) ..... and d) ..... the patient before taking the reading. The patient's arm should be e) ..... with the heart and be resting on a f) ..... surface. At the end of the process, the patient should be encouraged to write down their blood pressure reading, as well as noting g) ..... Patients can h) ..... their numbers in the Team Up, Pressure Down Journal. It is important to remind the patient to take their blood pressure on a

i) ..... basis, so they know that their j) ..... are effective.

4. Examine the diagram below which shows complications associated with hypertension. Look up any medical terms you do not understand and discuss them with your partner. Write down simple, everyday expressions to describe the technical language, for example - hypertension = blood pressure

## Main complications of persistent High blood pressure



- 5. Create a group presentation about Blood Pressure. It will be a short **seven slide**, **7**-*minute* PowerPoint presentation. The information will be in bullet points, and each slide will be titled as follows:
  - Slide 1: Introduction to presentation
  - Slide 2: What is blood pressure?
  - Slide 3: What is hypertension?
  - Slide 4: Two types of blood pressure
  - Slide 5: Complications of untreated hypertension
  - Slide 6: Risk factors
  - Slide 7: Managing hypertension with lifestyle changes
  - Slide 8: References

# 9.4 Read about Physical Assessment Techniques

- 1. In pairs, discuss the following questions
  - a. Have you ever seen a nurse do a nursing assessment?
  - b. Nurses use physical assessment skills to ..
    - i. Obtain baseline data
    - ii. Enhance the nurse-patient relationship
    - iii. Both of the above?
- 2. Match the following words with their definitions. Look up any words that are new.

Words	Definition
1. temperature (n) /ˈtɛmprəˌtʃuə-/	a. a measurement of a child's head around its largest area
<ol> <li>respiratory rate (n)</li> <li>/ˈrɛspərəˌtori ˈreɪt/</li> </ol>	b. quantitatively expressing hot and cold
3. heart rate (n) /ˈhɑə-t ˈreɪt/	<ul> <li>c. the distance from the bottom to the top of something or the highest point or the greatest degree.</li> </ul>
4. blood pressure (n) /ˈblʌd ˈprɛʃə-/	d. a measure of the effect of gravity
5. oxygen saturation (n) /ˈɑːksɪʤənˌsætʃəˈreɪʃən/	e. a distressing feeling often caused by intense or damaging stimuli
6. pain (n) /ˈpeɪn/	f. the fraction of oxygen-saturated hemoglobin relative to total hemoglobin in the blood.
7. weight (n) /ˈweɪt/	g. the force of your blood pushing against the walls of your arteries <sup>2</sup>

<sup>2</sup> Cambridge Dictionary. (2020). Dictionaries. Retrieved from https://dictionary.cambridge.org/dictionary/

8. height (n) /ˈhaɪt/	h. the number of times your heart beats in 1 minute
9. head circumference (n) /ˈhɛd sə-ˈkʌmfrəns/	i. measured by counting the number of breaths for one minute for how many times the chest rises
10.blood sugar level (n) /ˈblʌd ˈʃʊɡə ˈlɛvəl/	j. a level for blood sugar test results

- 3. Read the text quickly and decide what the main idea of the passage is. Then circle the best title from the three choices below and write it in the space provided.
  - a. Patient history
  - b. General appearance
  - c. Vital signs
  - d. Physical assessment

.....

Baseline observations are recorded as part of an admission assessment and documented on the patient's observation flowsheet. Ongoing assessments of vital signs are completed as indicated for your patient. It is mandatory to review the VICTOR graph at least every 2 hours or as patient condition dictates to observe trending of vital signs and to support your clinical decision-making process.

**Temperature**: tympanic temperatures for children older than 6 months. Less than 6 months use digital thermometer per axilla.

**Respiratory Rate**: count the child's breaths for one full minute. Assess any respiratory distress.

**Heart Rate**: Palpate brachial pulse (preferred in neonates) or femoral pulse in infant and radial pulse in older children. To ensure accuracy, count pulse for a full minute.

**Blood Pressure**: Baseline measurement should be obtained for every patient. Selection of the cuff size is an important consideration. A rough guide to appropriate cuff size is to ensure it fits a 2/3 width of upper arm. For neonates without previous hospital admissions do a blood pressure on all 4 limbs.

**Oxygen Saturation**: Monitor as clinically indicated. Note oxygen requirement and delivery mode.

**Pain**: Use FLACC, Faces, numeric scale, Neonatal Pain Assessment Tool as appropriate to the age group. Areas such as PICU and NICU use specialized pain scales for intubated and sedated patients. E.g. Modified Pain Assessment Tool (MPAT), Comfort B. Review current pain relief medications/practices<sup>3</sup>.

4. Read the text and then answer the following questions together with your partner

## Assessment Techniques

Whether you are performing a comprehensive nursing assessment or a focused assessment, you will use at least one of the following four basic techniques during the physical exam: *inspection, auscultation, percussion, and palpation*. These techniques should be used in an organized manner from least invasive to most invasive to the patient (Jarvis, 2012).

**Inspection** is the most frequently used assessment technique. When you are using the inspection technique, you are looking for conditions you can observe with your eyes, ears, or nose. For example, you may inspect the patient's skin color, location of lesions, bruises or rash, symmetry, size of body parts and abnormal findings, sounds, and odors. Inspection can be an important technique as it leads to further investigation of findings (Jarvis, 2012).

<sup>3</sup> The Royal Children's Hospital. (2020). Nursing assessment. Retrieved from

https://www.rch.org.au/rchcpg/hospital\_clinical\_guideline\_index/Nursing\_assessment/

**Auscultation** is usually performed following inspection, especially with abdominal assessment. The abdomen should be auscultated before percussion or palpation to prevent production of false bowel sounds. When auscultating, ensure the exam room is quiet and auscultate over bare skin, listening to one sound at a time. Auscultation should never be performed over patient clothing or a gown, as it can produce false sounds or diminish true sounds. The bell or diaphragm of your stethoscope should be placed on your patient's skin firmly enough to leave a slight ring on the skin when removed. Be aware that your patient's hair may also interfere with true identification of certain sounds. Remember to clean your stethoscope between patients. The diaphragm is used to listen to high pitched sounds and the bell is best used to identify low pitched sounds (Jarvis, 2012; Edmunds, Ward & Barnes, 2010).

**Palpation** is another commonly used physical exam technique, it requires you to touch your patient with different parts of your hand using different strength pressures. During light palpation, you press the skin about ½ inch to ¾ inch with the pads of your fingers. When using deep palpation, use your finger pads and compress the skin approximately 1½ inches to 2 inches. Light palpation allows you to assess for texture, tenderness, temperature, moisture, pulsations, and masses. Deep palpation is performed to assess for masses and internal organs (Jarvis, 2012).

**Percussion** is used to elicit tenderness or sounds that may provide clues to underlying problems. When percussing directly over suspected areas of tenderness, monitor the patient for signs of discomfort. Percussion requires skill and practice. The method of percussion is described as follows: Press the distal part of the middle finger of your nondominant hand firmly on the body part. Keep the rest of your hand off the body surface. Flex the wrist, but not the foreman, of your dominant hand. Using the middle finger of your dominant hand, tap quickly and directly over the point where your other middle finger contacts the patient's skin, keeping the fingers perpendicular.

- 1. The most frequently used assessment technique is:
  - a. palpation
  - b. inspection
  - c. percussion
  - d. auscultation
- 2. How many nursing assessment techniques are described in the text?
  - 1. one
  - 2. two
  - 3. three
  - 4. four
- 3. What is the name of the technique that you can observe with your eyes, ears, or nose?
  - 1. inspection
  - 2. auscultation
  - 3. palpation
  - 4. percussion
- 4. What technique that requires you to touch your patient with different parts of your hand using different strength pressures?
  - a. inspection
  - b. auscultation
  - c. palpation
  - d. percussion
- 5. What technique is used to determine tenderness or sounds that may provide clues to underlying problems?
  - a. inspection
  - b. auscultation
  - c. palpation
  - d. percussion

a.	You will use at least one of the four basic techniques during a physical exam.	T/F
b.	Auscultation is the most frequently used assessment technique.	T/F
C.	Palpation is usually performed following inspection.	T/F
d.	Deep palpation is performed to assess for masses and internal organs.	T/F
e.	Percussion is used to determine tenderness or sounds.	T/F
f.	The diaphragm is used to listen to high pitched sounds.	T/F
g.	The bell is best used to identify high pitched sounds.	T/F
h.	In light palpation, you press the skin about $\frac{1}{2}$ inch to $\frac{3}{4}$ inch with the pads of your fingers.	T/F
i.	Deep palpation allows you to assess for texture,	T/F

tenderness, temperature, moisture, pulsations, and masses.

6. In groups, prepare a role play in which a nurse undertakes a health assessment with a new patient.

Make sure to follow the correct assessment order when doing your assessment (inspect, auscultation, percussion, palpation). Look at their belly first. Then listen with your stethoscope for 15 seconds in each quadrant. Then percuss with your fingers. And lastly, palpate by pressing lightly around their belly.



# 9.5 Writing a Physical Assessment

- 1. Discuss the following questions with a partner
  - a. Have you ever seen a patient while she/he is being given a physical examination?
  - b. Why did she/he have a physical examination?
  - c. What do you know about examination techniques?
- 2. In pairs, discuss the words in the table below and without using a dictionary, write the meaning of the words

Words	Pronunciation	Meaning in Bahasa
1. examination (n)	/ɪgˌzæmɪ'neɪʃən/	
2. observation (n)	/ˌɒbzə'veɪʃən/	
3. visual (adj)	/ˈvɪʒʊəl/	
4. to detect (v)	/dɪ'tekt/	
5. physical data (n)	/ˈfɪzɪkəl ˈdeɪtə/	
6. <b>gentle</b> pressure (adj)	/'dʒentəl/	
7. <b>deep</b> pressure (adj)	/'di:p/	
8. significant (adj)	/sɪg'nɪfɪkənt/	

9.	characteristic (n)	/ˌkærəktə'rɪstɪk/	
10.	to tap (v)	/'tæp/	
11.	fingertips (n)	/ˈfɪŋɡə ˈtɪps/	

3. There are 4 types of assessment techniques used when doing a physical examination. Read the text below and discuss the differences in the 4 techniques with a partner.

## ASSESSMENT TECHNIQUES

Physical assessment findings, or objective data, are obtained through the use of four specific diagnostic techniques: inspection, palpation, percussion, and auscultation. Usually, these assessment techniques are performed in this order when body systems are assessed. An exception is in the assessment of the abdomen, when auscultation is performed prior to percussion and palpation, as the latter two can alter bowel sounds. These four techniques validate information provided by a patient in the health history, or they can verify a suspected physical diagnosis. Inspection, palpation, percussion and auscultation are examination techniques that enable the nurse to collect a broad range of physical data about patients.

**Inspection** The process of observation, a visual examination of the patient's body parts to detect normal characteristic or significant physical signs

**Palpation** Involves the use of the sense of touch. Giving gentle pressure or deep pressure using your hand is the main activity of palpation

**Percussion** Involves tapping the body with fingertips to evaluate the size, borders, and consistency of body organs and discover fluids in body cavities.

Auscultation Listening to sounds produced by the body.

4. Based on the reading<sup>4</sup> above, decide which technique would be most appropriate for the examinations described below.

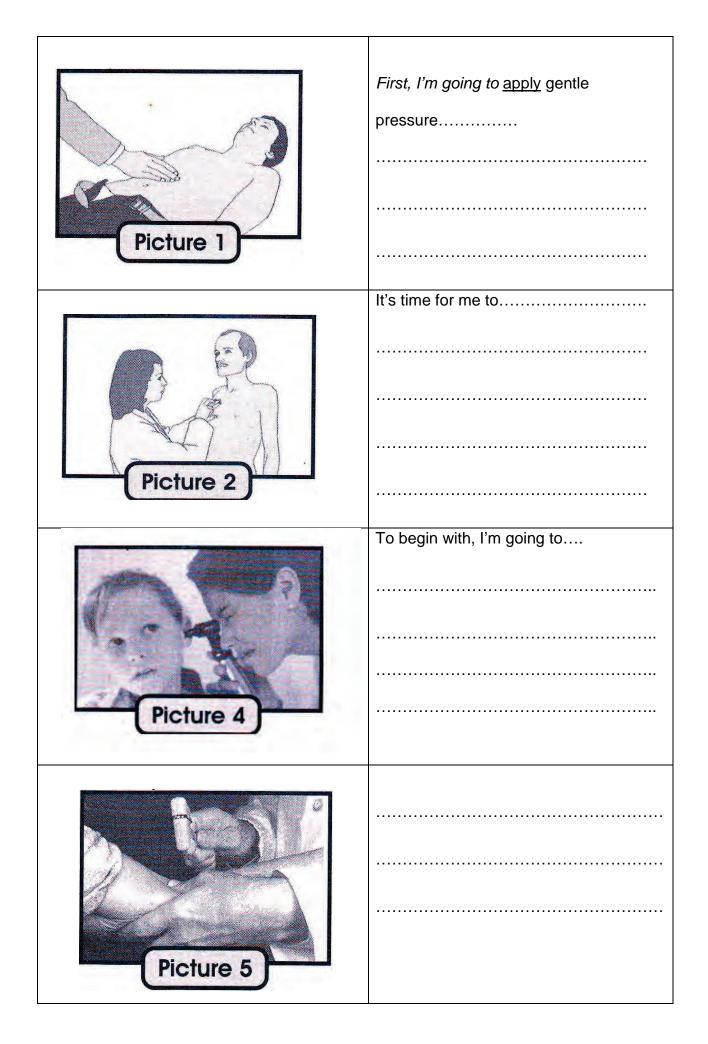
Activity	Technique
a. inspecting a patient's mouth and/or throat	inspection
b. examining a patient's respiratory system	
c. asking a patient to stand up to examine for scoliosis	
d. observing the colour of patient's eyes	
e. observing the movement of air through patient's lungs	
f. testing the patient's deep tendon reflexes using a hammer	
g. checking the patient's tender areas with your hand	
<ul> <li>h. pressing the patient's abdomen deeply to check the condition of his/her internal organ</li> </ul>	
<ul> <li>establishing good lighting, so you can observe the patient's body parts</li> </ul>	

When you have finished, check your answers in groups and discuss with your teacher. Be prepared to give reasons for why you chose your answer.

5. Below are 4 pictures showing different kinds of physical examinations. Discuss what is happening in each picture with a partner. Try to use the vocabulary from exercise 2. On your own, write a brief description of each examination

Start each description, by explaining what you are going to do. Use verbs in the present tense.

<sup>&</sup>lt;sup>4</sup> Adapted from Pratiwi, I. (n.d.). English for the Professional Nurse (2<sup>e</sup> ed.). Malang: Muhammadiyah University of Malang.



- 6. Choose one physical assessment technique from above. In pairs, do some more research on this technique. Using the present tense, write a summary explaining...
  - a. What the technique is;
  - b. When to use it;
  - c. How to do it.

Write a minimum of 150 words.

# **10.1 Language for Responding to How a Patient is** Feeling

1. With a partner, read the following dialogue between a nurse and patient aloud.

- Nurse: Good morning, My Bayu. I'm nurse Dodi, and I'm in charge of this shift.
- Patient: Good morning, nurse Dodi.
- Nurse: How did you sleep?
- **Patient:** I didn't sleep well at all. I had some trouble breathing.
- Nurse: Oh, that's no good. So, how are you feeling today?
- **Patient:** I'm feeling a bit better, but I'm still having some trouble breathing.
- Nurse: I see. Well, maybe it's better for you to sit in a half sit position. Let me help. (The nurse helps the patient to sit in a half sit position). Do you feel better now?
- **Patient:** Umm.... yes, that feels a little more comfortable. What's the latest on my condition?
- **Nurse:** Well, you're having trouble breathing because there is a problem in your lungs. I'm sorry Mr Bayu, but I can't tell you the exact problem before we do a physical examination. So, today at around 10 am you are going to have a thorax x-ray.
- Patient: I'm a bit nervous. You see, I've never had an x-ray before. Is it painful?
- **Nurse:** No, it isn't painful, and I'll be there if you need any help.
- Patient: That's good. So, what will the x-ray show?
- **Nurse:** Well, I don't know exactly yet, but hopefully we can find out what the problem is. After the doctor sees the image of your lungs, she'll explain it to you.
- Patient: Well, ok.

Nurse: Do you need anything, Mr Bayu?

Patient: No thanks. I'm ok right now.

- **Nurse:** Don't forget if you need any help whatsoever, please just press the call button.
- Patient: Yes, sure.

2. Answer the following questions about the dialogue.

- a. Why didn't the patient sleep well?
- b. Has his condition improved today?
- c. What assistance does the nurse give the patient to help him feel better?
- d. What kind of physical examination will the patient undergo?
- e. Why is the patient concerned about the examination?
- f. Who will explain the findings of the examination to the patient?
- 3. Which of the following expressions from the dialogue are examples of...
  - a. a nurse checking a patient's condition
  - b. a patient describing how he/she is feeling
  - c. a nurse reassuring a patient or
  - d. none of the above?

Match the expression a-d with the example, the first one is done for you.

For example. Good morning. (d)

- 1. How did you sleep?
- 2. I didn't sleep well at all.
- 3. I had some trouble breathing.
- 4. Oh, that's no good.
- 5. How are you feeling today?
- 6. I'm feeling a bit better.
- 7. I'm still having some trouble breathing.
- 8. I see.

- 9. Do you feel better now?
- 10. That feels a little more comfortable.
- 11. What's the latest on my condition?
- 12. I'm a bit nervous.
- 13. Is it painful?
- 14. I'll be there if you need any help.
- 15. That's good.
- 16. Do you need anything?
- 17. I'm ok right now.
- 18. If you need any help, please press the call button.
- 4. With a partner, write three appropriate responses to each of these cues.
  - a. How did you sleep?

Not too bad, thanks.

I couldn't sleep much. It is so noisy in this room. I slept a little, but I had some pain in my right hip.

- b. How are you feeling right now?
- c. Can I get you anything?
- d. Remember to press the call button if you need anything.
- e. I couldn't sleep because my back hurts.
- f. The smell of food is making me nauseous.
- g. I'm worried about the results of my tests.

5. With a partner write a dialogue between a patient and a nurse. The patient is frustrated/angry because his/her symptoms have not improved.

The nurse calmly explains the situation to the patient and reassures him/her. Include at least 6 examples of the patient expressing how he/she feels and appropriate responses from the nurse.

Patient:	(In a loud voice) Excuse me, nurse! Nurse!
Nurse:	Good afternoon How can I help you?
Patient:	
Nurse:	

# **10.2 Grammar for Making Comparisons**

1. Look at the words below. What parts of speech are they? What is the difference in meaning? Discuss as a group.

pain ill	ache	sick	hurt
----------	------	------	------

2. Read the following descriptions to check if your group was correct. Discuss the differences in British English and American English<sup>5</sup>.

# PAIN and ACHE

Both of these words are most commonly used as nouns. They refer to unpleasant sensations that you feel in your body, although they are slightly different feelings. A pain is usually used to refer to a kind of sharp discomfort that is difficult to ignore.

Yesterday I suddenly felt a lot of pain in my stomach. I was taken to hospital where they discovered I had appendicitis.

Ache is similar to pain, but it usually is used to refer to a duller kind of discomfort that may continue for longer than a pain might. Common examples are:

Headache, stomach ache, backache, heart ache.

Note that heartache is used to refer to a kind of emotional pain, for example if you are in love with someone and they are not treating you well you can say He is causing me a lot of heartache.

Less commonly, both pain and ache can be used as verbs. Pain in this form means to cause someone unhappiness. Note that you cannot use pain in the progressive or continuous form in standard UK or US English.

<sup>5</sup> BBC Learning English. (2020). Ask About English. Retrieved from

 $https://www.bbc.co.uk/worldservice/learningenglish/language/askaboutenglish/2010/03/100323\_aae\_sick\_pain\_page.shtml$ 

For example:

It pains me to think of you being so unhappy with your life – meaning it makes me feel unhappy that you are so sad.

You can also use ache as a verb. Unlike pain, ache can be used in the progressive form. For Example:

My back is really aching.

I wish my leg would stop hurting, it really aches.

Interestingly, you can also use the expression 'aches and pains' to refer to a general feeling of being unwell.

## SICK and ILL

Both of these words are most commonly used as adjectives as in:

I feel sick.

Ed had to leave school early because he was ill.

In American English, these two words have more or less the same meaning – they refer to a feeling of being unwell, whatever the problem might be. On the other hand, in British English, they have more distinct meanings. Sick most commonly refers to feeling as if you are going to vomit, as in:

I think I'm going to be sick

...while ill refers to any other feeling of being unwell. However, there are some phrases which are commonly used where sick has a more general meaning. F

I've been off sick for ten days. – meaning I haven't been to work/school for ten days because I've been feeling unwell.

Sick can also be used as a noun to refer to vomit.

If you have children, you can be sure that you will have to clear up some sick at least once during their childhood.

#### HURT

Hurt is a little bit different to the others in that it is commonly used as a verb and an adjective and, less commonly, as a noun. Of the above words, hurt is probably most similar to pain and ache and it can also mean the same as injure or injured. The key difference between hurt and pain and ache is that usually if you are hurt, it means the discomfort you experience is clearly caused by something outside of yourself.

However, pain and ache suggest a more internal reason for the unpleasant physical feeling.

Be careful on that ladder, you might hurt yourself if you fall - used as a verb

He was badly hurt in the train crash – used as an adjective

When it's used as a noun, hurt usually refers to some emotional pain.

When he told her he wanted a divorce she could hear a lot of hurt in his voice.

3. Below are the explanations for the Comparative and Superlative Adjective. Can you add the words to the explanation below?

nouns	Comparative	smallest
compared to	faster	Superlative

...... adjectives are used to compare differences between the two objects they modify (larger, smaller, ....., higher). They are used in sentences where two ...... are compared.

For example:

- a. Exit wounds are *larger* than entrance wounds.
- b. Physical memory is *smaller* than virtual one.
- c. A new study suggests *taller* women have heightened risk for ovarian cancer.

...... adjectives are used to describe an object which is at the upper or lower limit of a quality (the tallest, the ....., the fastest, the highest). They are used in sentences where a subject is ...... a group of objects.

For example:

- a. When the *smallest* thing gets in your eye, it can hurt very much.
- b. The highest death rates are among occupants of motor vehicles in traffic.
- c. People need the *fastest* treatment for severe cases.
- 4. Forming comparatives and superlatives depends on the number of syllables in the original adjective. Read the following explanations for forming regular comparatives and superlatives and add more of your own examples to the boxes.

### Forming regular comparatives and superlatives

#### a. One syllable

Add -er for the comparative and -est for the superlative. If the adjective has a consonant + single vowel + consonant spelling, the final consonant must be doubled before adding the ending.

Adjective	Comparative	Superlative
sharp	sharper	sharpest

### b. Two syllables

Adjectives with two syllables can form the comparative either by adding -er or by preceding the adjective with more. These adjectives form the superlative either by adding -est or by preceding the adjective with most. In many cases, both forms are used, although one usage will be more common than the other.

If you are not sure whether a two-syllable adjective can take a comparative or superlative ending, play it safe and use more and most instead. For adjectives ending in y, change the y to an i before adding the ending.

Adjective	Comparative	Superlative
careful	more careful	Most careful

### c. Three or more syllables

Adjectives with three or more syllables form the comparative by putting more in front of the adjective, and the superlative by putting most in front.

Adjective	Comparative	Superlative
important	more important	most important

5. Read the following explanations for forming regular comparatives and superlatives. Add more of your own examples for three or more syllable irregular comparatives and superlatives.

## Forming irregular comparatives and superlatives

These very common adjectives have completely irregular comparative and superlative forms.

Adjective	Comparative	Superlative	
Good	Better	Best	
Bad	Worse	Worst	
Little	Less	Least	
Much	More	Most	

- 6. Read the sentences with your partner. Complete the gap exercise together.
  - a. A pain refers to a kind of ..... discomfort that is difficult to ignore.
  - b. Ache usually is used to refer to a duller kind of discomfort that may continue for..... than a pain might.
  - c. Pain, ache, ill, sick and hurt have quite ..... meanings and uses,
  - d. In British English, sick and ill have ..... meanings.
  - e. There are some phrases which are commonly used where sick has a ...... meaning.
- 7. Based on the examples above, which word is the Odd-One-Out, meaning which word is different from the others? With your partner, give a reason for WHY each word doesn't belong?

a. bossy	cooperative	sneaky	selfish
b. colleague	partner	boss	co-worker
c. talking	listening	thinking	feeling
d. ambitious	competitive	aggressive	affectionate
e. supportive	helpful	critical	sympathetic

8. In pairs, ask and answer questions using the correct form of the adjective as in the example below. Ask follow-up questions to find out more information.

Speaker A: Asking a question that uses either a comparative or superlative adjective. Speaker B: Answer the question using a complete sentence

Who is ...... (wonderful)
A Who is the most wonderful person you've ever known?
B Hmm, probably my mother is the most wonderful person I've ever known.
A Can you give me a reason why?
B Of course. The reason I think my mother is so wonderful is because.....

- a. What is..... (important)
- b. Who is.....(famous)

c. What is ..... (good)

- d. What is .....(dangerous)
- e. Whose hair is ..... (long)
- f. What is ..... *(interesting)*
- g. What country is ..... (beautiful)
- h. Which car is .....(*luxury*)
- i. What job is ..... (busy)
- j. What sickness is ..... (horrible)



# **10.3 Reading about Pain Assessment**

- 1. With another student, discuss the following prompts.
  - a. If you find someone in pain, what should you do?
  - b. What problems do you think there might be in assessing a patient's pain?
- 2. Before reading, scan the article for the following vocabulary. Decide on the meaning of each word by choosing the correct definitions based on how each word is used in the text.

scales (n) /skeIl/

a. a range of numbers used to measure or compare things

b. to climb up a steep surface, such as a wall or the side of a mountain, often using special equipment

c. the relation between the real size of something and its size on a map, model, or diagram

objective (adj) /əb'dʒek.tɪv/

- a. something that you plan to do or achieve
- b. based on real facts and not influenced by personal beliefs or feelings
- c. influenced by
- or based on personal beliefs or feelings rather than based on facts

duration (n) /djʊəˈreɪ.ʃən/

- a. able to last and be used for a long time without becoming damaged
- b. the length of time that something lasts influenced by
- c. to do something again that has already been done

onset (n) / pn.set/

- a. the final part of something such as a period of time
- b. the moment something unpleasant starts
- c. a small part of something that is left after most of it has been used:
- 3. Scan the text<sup>6</sup> below for understanding. Circle the best title from the three choices Write the correct title in the space provided.
  - a. How to Assess Pain
  - b. The Challenges of Pain Assessment
  - c. Understanding Pain Assessment Scales

.....

The assessment of pain is a complex activity that involves a consideration of the physical and psychological aspects of the individual. Because pain is a subjective experience, the nurse needs to be able to summarize the information gained against some objective criteria. This is essential for diagnosis and for evaluating the effectiveness of interventions.

Only the person experiencing the pain knows its nature, intensity, location and what it means to them. One of the most seminal, widely used and accepted definitions of pain was put forward by McCaffery (1979, p.18), who suggests that pain is 'whatever the experiencing person says it is and exists whenever he says it does'.

#### Assessments of the patient's pain experience

To begin with, it is essential to identify the characteristics of the client's pain. This means that the nurse should consider the following

<sup>6</sup> One Stop English (2020). Pain Assessment. Retrieved from https://www.onestopenglish.com/esp-lesson-plans/pain-assessment/156842.article

The type of pain: is it crampy, stabbing, sharp?

How the client describes the pain may help in diagnosing its cause. Myocardial (heart) pain is often described as stabbing, but biliary pain as cramping or aching.

**Its intensity:** is it mild, severe or excruciating? Pain assessment scales are helpful here. The nurse can ask the patient to rate the pain on a scale of 0 to 10; zero being no pain and 10 being intolerable pain. With children, a range of pictures showing a child changing from happy to sad can be used. Colour 'mood' charts, with a series of colours from black through grey to yellow and orange, have also been used and are very useful for clients who have difficulty grasping numbers or articulating exactly what their pain is like.

**The onset:** was it sudden or gradual? Find out when it started and in what circumstances. What makes it worse? What makes it better? What was the patient doing immediately before it happened?

**Its duration:** is it persistent, constant or intermittent? Changes in the site: there may be tenderness, swelling, discolouration, firmness or rigidity. With appendicitis, a classic sign is the movement of pain from the umbilicus to the right iliac fossa. In a myocardial infarction (a heart attack), pain classically radiates down the arm, and with biliary pain it can radiate to the shoulder.

**Its location:** ask the patient to be as specific as possible, for example, indicating the site by pointing.

**Any associated symptoms:** Chart below shows some of the common symptoms of disease that can influence the response to pain. Signs such as redness, swelling or heat.

- 4. Read the text again and then answer the questions below. Check your answers with a partner.
  - a. What are the aspects that nurses should consider in pain assessment?
  - b. How to rate the pain on scale?
  - c. How to identify any associated symptom?
  - d. What signs can indicate pain?
- 5. Below are words that patient may use to describe their pain. Match the following words with their definitions <sup>7</sup>.

Words	Definition
1. tingling (adj) / ˈtɪŋɡlɪŋ/	a. to feel ongoing heat, or a sharp, prickly pain
2.stabbing (adj) /ˈstæb.ɪŋ/	<ul> <li>b. to have a feeling of sharp points being put quickly and lightly into your body</li> </ul>
3.aching (adj) /ˈeɪ kɪŋ /	c. feels like it starts and stops in time with your heart
4./ˈbɜː.nɪŋ/ (adj) /ˈblʌd ˈprɛʃə-/	d. a sudden sharp pain
5.throbbing (adj) /ˈθrɒb.ɪŋ/	e. a dull or constant pain
6.sharp (adj) /ʃɑːp/	f. sudden and intense pain

<sup>7</sup> Cambridge Dictionary. (2020). Dictionaries. Retrieved from https://dictionary.cambridge.org/dictionary/

6. You are an emergency nurse. A patient is complaining of heartburn, lack of appetite and nausea. You as a nurse must assess the patient's pain. Try to use the vocabulary from this lesson.

Create a dialogue with your partner and then role play for the class.

# **10.4 Vocabulary to Talk about Pain Assessment**

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1. Below are some words used to describe pain. Discuss these words – their meaning and how they would be used - with your partner.

₽

subjective (adj)	intensity (adj)	duration (n)	evaluate (v)
/səbˈdʒektɪv/	/ɪnˈten.sə.ti/	/djʊəˈreɪʃən/	/ɪˈvæljueɪt/
tender (adj)	onset (n)	objective (adj)	excruciating (adj)
/ˈtendər/	/ˈɒnset/	/əbˈdʒektɪv/	/ɪkˈskruːʃieɪtɪŋ/

After your discussion, practise the pronunciation with your teacher and then with your partner.

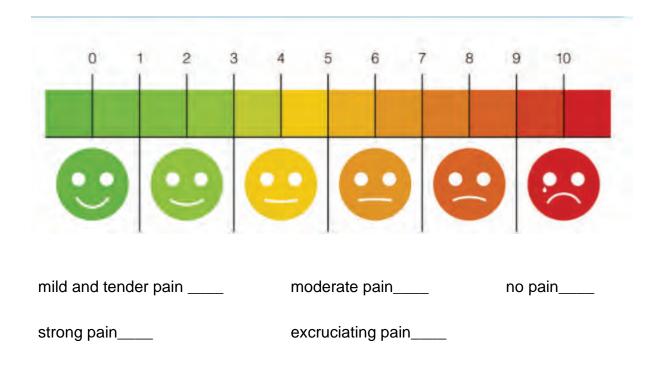
2. Match the following words to their definition

1. subjective	a. very strong or unbearable pain
2. onset	b. influenced by someone's beliefs or feelings, instead of facts
3. duration	c. sore or painful when touched
4. excruciating	d. the amount of time that something lasts
5. tender	<ul> <li>e. based on real facts and not influenced by personal beliefs or feelings</li> </ul>
6. objective	f. the beginning of something, usually something unpleasant
7. evaluate	g. to consider or study something carefully first
8. intensity	h. being felt strongly or having a very strong effect <sup>8</sup>

<sup>8</sup> Cambridge Dictionary. (2020). Dictionaries. Retrieved from https://dictionary.cambridge.org/dictionary/

#### 3. With your partner, fill the gaps in the sentences

- a. <u>Duration is the amount of time something lasts.</u>
- b. A pain is..... when you cannot bear it.
- c. A description is ......when it is based on the individual's experience or perceptions.
- d. The .....of a pain is when it begins.
- e. The ..... of a pain describes the degree to which the patient feels it.
- f. In order to .....a patient's pain, a nurse needs to know its characteristics.
- g. Being.....means relying on facts, rather than personal beliefs or feelings.
- h. When part of your body is sore or uncomfortable, it can be ..... to touch.
- 4. Pain can be rated on a scale. Match the expressions for describing pain to a number from the pain scale (0-10) below. Check your answers with the class.



5. With your partner, decide what level of pain the following health conditions might cause a patient. Decide where the pain would be felt and how it could be described by the patient.

a.	a heart attack	b.	appendicitis	C.	tonsillitis

d. a headache e. food poisoning f. labour



- 1. In pairs, brainstorm as many words as you can think of about the word pain. Check as a class.
- 2. Below is an example of a Pain Report. Read the example.

#### PAIN REPORT

#### Subjective Data

On Tuesday, April 2<sup>nd</sup> 2020 at 23.00, Mrs. Adrian complained of sharp pain in her post-operative wound located in the region of her lower abdomen. She had a grimace on her face. Mrs. Adrian stated that the pain ranged from moderate to severe and got worse when she moved. After receiving Mrs. Maria's report, Doctor Saaed gave instructions to the nurse to give the client an analgesic injection.

On Wednesday 3rd April 2020, at 08.00 (today), a nurse did an evaluation of Mrs. Adrian. The client stated that her type of pain had not changed, but it now occasionally ranges from mild to moderate. However, when she experiences the pain, it is much worse. Mrs. Adrian says that she feels she is suffering a lot.

Date/Time	Location of pain	Pain frequency	Pain intensity	Pain type
Tue, 02/04/2020 23.00	lower abdomen	constant	Moderate to severe	sharp
Wed, 03/04/2020 08.00	lower abdomen	occasional	Mild to moderate	sharp

- 3. In pairs, discuss the following questions.
  - a. What key information is included in a Pain Report?
  - b. Why is the pain report formatted like this?
  - c. What is NOT written in a pain report?
- 4. Using the model, write a pain report about a patient with appendicitis with your partner. Consider the following key information.
  - a. What is the timing of events?
  - b. Where is the pain?
  - c. What does the pain feel like?
  - d. How strong is the pain?
  - e. What sets the pain off?
  - f. What makes the pain better?

		P/	AIN REF	PORT				
Subjective Data								
					•••••			
Patient's name:								
Date/Time	L	ocation	of pain	Pain	frequency	Pain i	ntensity	Pain type

5. Swap your report with another pair of students' pain report.

Proof-read another pair's Pain Report. Make suggestions if any information is unclear or needs further detail.

Re-write your pain report and submit one copy of your pain report (per pair) to your teacher for assessment.



# **11.1 Grammar for Units of Measurement**

1. With a partner, list the information a healthcare professional collects from a patient who is being admitted to hospital. Divide your information into WORDS and NUMBERS. Why is it necessary to collect this information?

WORDS	NUMBERS
Example - First name	Date of birth

2. Match the expression on the left, with the correct meaning on the right.

1. weight	a. the force at which blood pushes against the artery walls during contraction and relaxation of the heart.
2. height	<ul> <li>b. commonly referred to as "sats" is the fraction of <u>oxygen</u>-saturated hemoglobin relative to total hemoglobin</li> <li>(unsaturated + saturated) in the blood.</li> </ul>
3. temperature	c. also known as 'resps', is the number of breaths a person takes per minute.
4. blood pressure	d. The lower number in a blood pressure reading, refers to the pressure inside the artery when the heart is at rest and is filling with blood.

5. systolic pressure	e. a measurement of the heart rate, or the number of times the heart beats per minute.
6. diastolic pressure	f. a body's relative mass or the quantity of matter contained by it, giving rise to a downward force; the heaviness of a person or thing.
7. respiration rate	g. the measurement of someone or something from head to foot or from base to top.
8. pulse	h. the degree of internal heat of a person's body.
9. oxygen saturation	<ul> <li>The higher number in a blood pressure reading, refers to the pressure inside the artery when the heart contracts and pumps blood through the body.</li> </ul>

3. Read the dialogue below between patient Samira and nurse Bessie with a partner. Fill the gaps with the correct expression from the box below.

weight	temperature	blood pressure				
pulse	respiration rate	oxygen sats				
Bessie:	I'm just going to take your Obs r	I'm just going to take your Obs now.				
Samira:	OK.	OK.				
Bessie:	I'll just pop this in your ear and v	I'll just pop this in your ear and wait for the beep.				
Samira:	So what's my <sup>1</sup> ?					
Bessie:	It's thirty-seven three. That's good.					
Samira:	What's next?	What's next?				
Bessie:	I'll get the rest of the information	from this machine. Lift up your				
	arm for me, please. That's it. I'l	I wrap the cuff around your arm.				
Samira:	Is that OK?	Is that OK?				
Bessie:	Yes, that's fine. Now, I'll just clip	o this lead on your finger.				
Samira:	What's that for?					

It measures that amount of oxygen in your blood.
ОК
I'll turn the machine on now.
What does it say?
Mm. Your <sup>2</sup> is one hundred over sixty-
eight. That's fine. Your <sup>3</sup> is 64. That's OK
too. Your <sup>4</sup> are 98%. That's the
percentage of oxygen in your blood.
Is that good?
Yes, it's fine. That's all from this machine. Your
<sup>5</sup> is 18 breaths a minute. I counted them
while you were watching the machine.
I didn't even know you were doing it.
I know. Now, can you step on these for me?
OK.
Great. Let's see your <sup>6</sup> is 45 kilos.
Am I finished now?
Yes. That's it.

4. Read the following information about units of measurement used in hospital admissions and observations.

### UNITS OF MEASUREMENT

	Unit (abbreviation)	Conversions
Height	Meter (m)	1 meter = 100 centimeters (cm) 1 meter = 3.28 feet (ft, ' ) 1 meter = 39.4 inches (in, '' )
Weight	Kilogram (kg)	1 kilogram = 1,000 grams (g) 1 kilogram = 2.20462 pounds (lb) 1 kilogram = 35.274 ounces (oz)
Temperature	Degree Celsius (°C)	1-degree Celsuis (°C) = 33.8 degree Fahrenheit (°F)

5. Look at the examples of written and spoken abbreviations. With your partner, practise saying the spoken abbreviations.

Sign	Written	Spoken
Temperature	T 37°	Temp thirty-seven
Pulse	P 64	Pulse sixty-four
Blood Pressure	BP 100/68	BP one hundred over sixty-eight
Respiration Rate	RR 18	Resps eighteen
Oxygen saturation	O2 SATS 98%	Sats ninety-eight percent



- 1. With a partner, discuss the following questions.
  - a. What kinds of drugs do you commonly use in relieving your pain, such dizziness?
  - b. What do you know about the common treatments dealing with your illness when you were in hospital?
  - c. Mention the familiar English terms related to medication.
- 2. Read the passage and answer the following comprehension questions.

#### **Smart about Medicine**

Medicines can help people fight illnesses and get better faster and can keep people from getting sick in the first place. But if they aren't taken correctly, medicines may cause more harm than good. Read on to learn more about responsible medicine use.

#### DO take all your antibiotics.

Here's a scenario: After three days of taking the medicine your doctor prescribed for strep throat, you feel great. You still have seven days' worth of pills left. Is it OK to stop taking them and shove them to the back of the medicine cabinet until the next time you get sick?

Nope! Always finish taking all the antibiotics (bacteria-fighting drugs) prescribed by your doctor, even if you start to feel healthy again. "When bacteria are undertreated, they have a chance to multiply," says Dr. Tanya Arora, a pediatrician at Children's Hospital Los Angeles. "You get bacteria that no longer respond to the antibiotic." Some antibiotics don't just get rid of bacteria, Arora adds. Some also help prevent other problems. For instance, strep throat that is not fully treated can lead to rheumatic fever, an illness that can damage the heart.

#### DO make sure you are taking the correct dose.

Every week, approximately one in 10 kids use some kind of cough and cold medicine, according to experts at Boston University. Cough and cold medicines can be a big help when you're sniffling and sneezing. But because you can buy them without a prescription, many people don't realize just how dangerous those drugs can be if they are misused.

While cough medications may have different names, they often have the same or similar ingredients. For example, the ingredient diphenhydramine, which treats coughs, can make you stop breathing if you take too much.

"These medications are not meant to take away all your symptoms and make you feel back to normal—they only help a little bit," Arora says. Taking more than you should won't help your symptoms.

#### DO find out whether your medicine shouldn't be mixed.

Sometimes, drugs can interact with other drugs, foods, or vitamins. For example, iron supplements can keep tetracycline, a common antibiotic, from working. Grapefruit juice affects a number of medicines, such as ones for heart disease and allergies, as well as some that fight infections.

Certain vitamins and supplements for athletes can have damaging effects on the kidneys and liver. "It is important that your doctor know [what you are taking] so that they avoid prescribing medications that may worsen that damage," says Virginia Cox of the Consumer Healthcare Products Association.

#### Don't take expired meds.

Some medicines don't work as well as time passes or if they are kept in high temperatures. Expired medicine may not work as intended. That is why it is better to always go to the doctor rather than try to figure out on your own what you ought to do.<sup>9</sup>

3. Answer the following questions based on the information in the text.

<sup>9</sup> Magrid, J. (2017). Smart About Medicine. Retrieved from https://studylib.net/doc/25195649/smartaboutmedicine1000

- 1. According to the text, how many teenagers think there is nothing wrong with taking prescription drugs without a doctor's prescription?
  - a. One out of ten teenagers
  - b. One out of four teenagers
  - c. One out of three teenagers
  - d. About half of teenagers
- 2. The text gives readers a list of things they should and should not do with medicines. Which of the following does the writer include in the text?
  - a. You do not always need to finish taking all the antibiotics prescribed.
  - b. You can take someone else's medicine.
  - c. You can mix medicine with any other foods, drugs, or vitamins.
  - d. You should not take expired medicine.
- 3. Sometimes food or other medications can interfere with the effectiveness of a drug. What evidence from the text supports this conclusion?
  - a. "Grapefruit juice affects a number of medicines, such as ones for heart disease and allergies, as well as some that fight infections."
  - b. "Always finish taking all the antibiotics (bacteria-fighting drugs) prescribed by your doctor, even if you start to feel healthy again."
  - c. "Some medicines don't work as well as time passes or if they are kept in high temperatures. Expired medicine may not work as intended."
  - d. "Certain vitamins and supplements for athletes can have damaging effects on the kidneys and liver."
- 4. Based on the text, which of the following is correct?
  - a. All medicines are safe to mix with other drugs, foods, or vitamins.
  - b. People always take all of their antibiotics.
  - c. Many people do not use medicines correctly.
  - d. No one ever shares their medication with other people.

- 5. What is this text mostly about?
  - a. How to take medicine responsibly.
  - b. How to get a prescription for an illness.
  - c. Different kinds of medicine.
  - d. How to take medicine for a cold.

#### 6. Read these sentences from the text.

Some medicines don't work as well as time passes or if they are kept in high temperatures. Expired medicine may not work as intended. As used in the text, what does the word "expired" mean?

- a. Very sick
- b. Prescribed
- c. Past a certain date
- d. Before a certain date
- 7. Choose the word that best completes the sentence.

Grapefruit juice can affect a number of medicines, ...... you should ask your doctor if it is safe to drink it with your medication.

- a. Before
- b. So
- c. Because
- d. After

QUANTIFIER	DEFINITION	EXAMPLES
Many	Used with plural, countable nouns	<ol> <li>There aren't many nurses in the public health center today.</li> </ol>
		<ol> <li>Many people don't realize just how dangerous medicine can be if it is misused.</li> </ol>
Much	Used with singular, uncountable nouns	<ol> <li>The hospital doesn't have much funding.</li> </ol>
Some	1. Refer to an unknown number or quantity	<ol> <li>Paracetamol can help people to fight some illnesses.</li> </ol>
	<ol> <li>Used with uncountable and countable nouns</li> <li>Used with singular and</li> </ol>	<ol> <li>Some medicines don't work as well as time passes or if they are kept in high temperatures.</li> </ol>
	plural nouns	6. Grapefruit juice affects a number of
	<ol> <li>Used in positive sentences</li> </ol>	medicines, such as ones for heart disease and allergies, as well as some that fight infections.
Any	1. Refer to an unknown number or quantity	<ol> <li>You don't need to take any drugs If you feel tired instead of taking a rest.</li> </ol>
	2. Used with uncountable and countable nouns	8. Do you have any problem with your
	3. Used with singular and plural nouns	stomach?
	<ol> <li>Used in negative sentences</li> </ol>	
	5. Used in questions	
	<ol> <li>Used in positive sentences to mean "it doesn't matter which"</li> </ol>	

- 5. Select the correct quantifier (in brackets) to complete the sentence.
  - a. We need to have..... apples for antioxidants. (some any)
  - b. .....scientists say that alternative treatments are not scientifically tested. *(many much)*
  - c. Nurses have ..... responsibility in caring patient. (many -much)
  - d. .....people think it's better to eat healthily than to exercise a lot. (some or any)

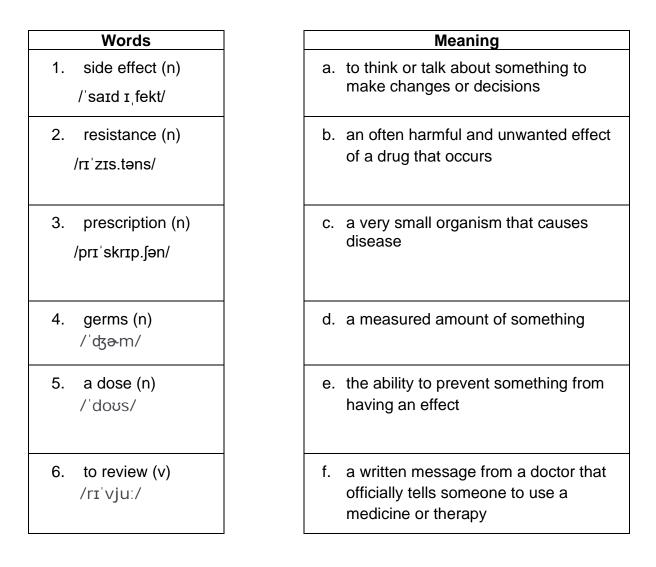


## **11.3 Read about Taking Medications**

1. Match the vocabulary with the pictures below. Discuss the difference in these types of medication and what they might be used for.

syrup (n)	ointment (n)	tablet (n)	capsule (n)
/ˈsirəp/	/ˈoɪntmənt/	/ˈtæblət/	/ˈkæpsəl/
a	CONTRACIN DOPHTHALMOD DITTMENTUS TERLIE CONTAINED DITTMENTUS TERLIE CONTAINED DITTMENTUS DITT	b	
C		d	

2. Work in pairs, discuss the meaning of the words. Match the meaning from the following box.



3. Read the article quickly. Discuss with your partner, what is the main point of this article? In a few sentences, sum up the main point of the article.

#### Are You Taking Medication as Prescribed?

Medication adherence, or taking medications correctly, is generally defined as the extent to which patients take medication as prescribed by their doctors. This involves factors such as getting prescriptions filled, remembering to take medication on time, and understanding the directions.

Common barriers to medication adherence include...

- the inability to pay for medications
- disbelief that the treatment is necessary or helping
- difficulty keeping up with multiple medications and complex dosing schedules
- confusion about how and when to take the medication

Poor adherence can interfere with the ability to treat many diseases, leading to greater complications from the illness and a lower quality of life for patients. Here are some examples of areas in which medication adherence can pose challenges, along with tips for taking medications correctly and talking with health care professionals about your questions and concerns.

#### **Taking Antibiotics**

If you feel better and no longer have symptoms, you may think your illness is cured. But if you have a bacterial infection, this can be a dangerous assumption.

If the full course of antibiotics is not taken, a small number of bacteria are likely to still be alive. These surviving germs are likely to have some natural resistance to the antibiotic. As they multiply and spread, a new strain of resistant germs may begin to develop. This may be one way that Methicillin-Resistant Staphylococcus Aureus (MRSA) infections occur. MRSA is a type of bacteria that's resistant to certain antibiotics. It's important to use antibiotics appropriately and to take the medication exactly as directed.

- Take all doses of the antibiotic, even if the infection is getting better.
- Don't stop taking the antibiotic unless your doctor tells you to stop.
- Don't share antibiotics with others.
- Don't save unfinished antibiotics for another time.

#### Taking HIV/AIDS Medications

People with HIV/AIDS can have a particularly difficult time taking medications as prescribed, according to Richard Klein, the HIV/AIDS program director for the Food and Drug Administration's (FDA) Office of Special Health Initiatives (OSHI). Some of the main reasons:

Multiple drugs may need to be taken at different times, which can be hard to remember. The side effects of certain drugs can sometimes make people feel worse instead of better. When people feel okay, they may not feel the need to take their drugs. They don't have the 'physical reminder' to take the medications.

People may not be aware of the risks of drug resistance that can occur if they stop treatment or skip or lower doses.

When you skip doses or stop taking a prescribed medication, you may develop strains of HIV that are resistant to the medications you are taking and even to some medications you haven't taken yet. This may result in fewer treatment options should you need to change treatment regimens in the future.

FDA has given expedited reviews to several fixed dose combination medications like Atripla (a combination of efavirenz, emtricitabine and tenofovir) and Combivir (a combination of retrovir and epivir) to treat HIV. Fixed dose combination tablets contain two or more anti-HIV medications that can be from one or more drug classes.

"These fixed dose combinations are examples where the constituent drugs were already approved," says Klein, "but the agency expedited review because the combined formulations simplified dosing, and thus were likely to improve adherence." A standard drug review time is 10 months, while an expedited review of fixed dose combination tablets is generally completed within 6 months.<sup>10</sup>

<sup>&</sup>lt;sup>10</sup> FDA. (2020) Are You Taking Medication as Prescribed? Retrieved from https://www.fda.gov/consumers/consumer-updates/are-you-taking-medication-prescribed

4. Work in pairs. Read the text then look at new vocabulary and add your words into the table below

Vocabulary I Know	Vocabulary I'm Not Sure About	Vocabulary I Don't Know

5. Read the text again. With your partner, decide if the following statements are true or false.

a.	Patients should take the medication on time.	T/F
b.	People sometimes stop taking medication when they feel better.	T/F
C.	Not taking antibiotics for the full course means germs can still spread and develop.	T/F
d.	It's important to use antibiotics exactly as directed.	T/F
e.	If you have several drugs to take, you should take them all at one time.	T/F
f.	Some side effects of drugs make patients feel worse first, before they feel better.	T/F
g.	When you skip doses of a prescribed medication, you may develop resistance.	T/F
h.	A standard period to review your medications is every 10 months.	T/F

- 6. In small groups, discuss the following questions.
  - a. Do you take any prescription medications (medicine you can only get with a note from your doctor)?
  - b. Do you take any over the counter medications (medicine you can buy at any drugstore)?
  - c. What should you do before you take your medications?
  - d. Have you or anyone you know suffered any side effect from their medication?



# **11.4 Read About Injections**

### INJECTION /In'dʒek.ʃən/ (noun)

the act of putting a liquid, especially a drug, into a person's body using a needle and a syringe (= small tube)

1. With a partner, discuss what you think is happening to the child in the image below. What is his reaction? What reactions can patients have to injections?



2. Quickly read the text below. How many types of injections are mentioned?

#### Injections

In medical terminology injection is referred as a shot or jab and is a popular way of infusing liquid medicines into a patient's body. Besides taking oral medicines for health problems or topical applications of medicines in the form of lotions and creams, there are injections, which are considered the most frequently used medical procedures.

According to a report by the World Health Organisation (WHO), an estimated 20 billion injections are administered each year world-wide<sup>11</sup>.

#### What is an injection?

An injection is defined as a process by which a small area of the skin is pierced or punctured with a syringe and needle to insert a substance for prophylactic, curative, or recreational purposes. An injection follows a parenteral route of administration; that is, medicines are administered not through the digestive tract.

#### Methods of injections: Types of injections

Injections can be given intravenously, intramuscularly, intradermally, or subcutaneously. Each type of injection is used for a specific health problem, specific purpose, but the procedures for preparing the injections are the same.

#### **Intradermal Injections**

This technique involves the injection of the fluids into the top layer of the skin, which is soft and pliable. Mainly used for treating certain health problems, including many allergies and tuberculosis. The liquid medicine is inserted with an intradermal injection, which will lie just beneath the skin's surface in between the layers of skin. The needle is extremely tiny, and it inserts the fluid properly under the surface of the skin.

#### **Intramuscular Injections**

This is the most common way of injecting medication directly into a patient. For rapid absorption of the medicine this is a very useful process because the medicine from this injection is inserted directly into the muscle. This allows the medicine to gain easy access to the blood stream and quickly begin its healing work. Intramuscular injections are the best and the safest way of injecting medication into a patient.

#### **Subcutaneous Injections**

Such type of injections are used where the medicine needs to be absorbed slowly. In this type of injection, the needle has to go through the first 2 layers of

<sup>&</sup>lt;sup>11</sup> Pharmaceutical and Drug Manufacturers. (2020). Injection. Retrieved from <u>http://www.pharmaceutical-drug-manufacturers.com/pharmaceutical-drugs/injections.html</u>

skin that is the epidermis and dermis. The needle should further penetrate into the fatty layer of the skin, known as the subcutaneous tissue. Medicines administered through subcutaneous injections have the least chances of having an adverse reaction. Insulin is one type of medicine that is injected in this way, so also a number of immunizations.

In all these injections, the size of the needle varies. The deeper the injection, the longer the needle should be. In intramuscular injection, the needle is at least a few inches long. Subcutaneous injections have needles which are approximately an inch long. Intradermal injections use the shortest needle because they are only inserted just beneath the first layer of skin.

#### **Intravenous Injections**

Intravenous therapy is a therapy that delivers fluids directly into a vein. The intravenous route of administration can be used both for injections, using a syringe at higher pressures, as well as for infusions, typically using only pressure supplied by gravity. Intravenous infusions are commonly referred to as drips<sup>12</sup>.

- 3. Now read the text more carefully and choose the correct meaning of the following words based on their use in the text.
- 1. intramuscular (adj) /,ɪntrəˈmʌskjʊlə/
- 2. intradermal (adj)

/ˌɪntrəˈdəːm(ə)l/

- 3. subcutaneous (adj)
   /ˌsʌbkjuːˈteɪnɪəs/
- 4. intravenous (adj) / intrəˈviːnəs/

a. situated or applied under the skin

b. existing or taking place within, or administered into, a vein or veins

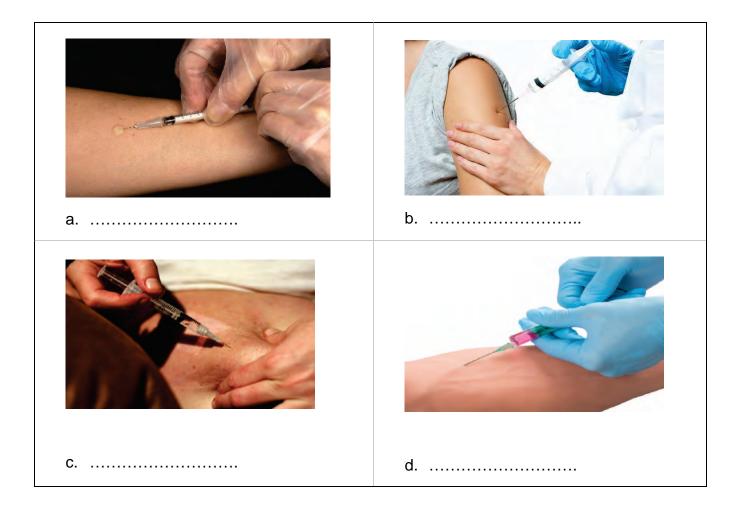
c. situated or applied within the layers of the skin

d. situated or taking place within, or administered into, a muscle

<sup>&</sup>lt;sup>12</sup> Wikipedia. (2020). Intravenous therapy. Retrieved from https://en.wikipedia.org/wiki/Intravenous\_therapy

4. Match the injection type with the images below.

intramuscular	intradermal
subcutaneous	intravenous



5. Based on the information in the text, are the following statements True or False? Circle T or F next to the statements below.

a.	The World Health Organization reports that, globally, in excess of 20 billion injections are given annually.	Т	F
b.	Preparation procedures vary between injection types.	Т	F
C.	The safest way of injecting medication into a patient is intradermally.	Т	F
d.	Insulin is the only type of medicine that is injected subcutaneously.	Т	F
e.	An intravenous injection relies on the pressure of gravity to deliver fluids directly to a vein.	Т	F

- 6. Based on the information in the text, answer these questions below in the space provided.
  - a. What is a parenteral form of administration?
  - b. Why is the needle of an intradermal injection smaller than other types?
  - c. What are two benefits of intramuscular injections?
  - d. What is an advantage of subcutaneous injections?
  - e. How does an intravenous injection differ from an intravenous infusion?
- 7. Work with a partner to categorize the medications and substances listed under the table into the most appropriate injection method. Sometimes more than one injection method is correct.

Intramuscular	Intradermal	Subcutaneous	Intravenous
		Chickenpox vaccine	

Chicken pox Vaccine	Blood transfusion	MMR Vaccine	Allergy test	Saline
Antibiotics	Parenteral nutrition	Heroin	Insulin	EpiPen

## **11.5 Vocabulary to Talk about Medication**

The Nursing Process English for Nursing 1

1. With a partner, write as many nouns, verbs, and adjectives as you can related to MEDICATION in the table below. No dictionaries or notes.

Nouns		N	
	Adjectives	Verbs	

Match the phonemic vocabulary to the phonemic script. Practice pronouncing the 2. words with your partner.

Nouns/Adjective	Pronunciation
a. laxative	/ɪˈmɛtɪk/
b. sedative	/antɪˈsɛptɪk/
c. antiseptic	,an(ə)lˈdʒiːzɪk,
d. emetic	/ˌantɪbʌɪˈɒtɪk/
e. analgesic	/ˈlaksətɪv/
f. antibiotic	/ˈsɛdətɪv/

### Adjectives

- a. drowsy
- b. intravenous
- c. allergic

Verbs		
a. hospitalize		
b. induce		
c. inhale		
d. overdose		
e. stimulate		
f. prescribe		

#### 3. Match each word with its meaning.

Noun/Adjectives	Meaning
a. laxative	(of a drug) acting to relieve pain
b. sedative	a medicine or other substance which causes vomiting
c. antiseptic	a medicine (such as penicillin or its derivatives) that inhibits the growth of or destroys microorganisms
d. emetic	a medicine tending to stimulate or facilitate evacuation of the bowels
e. analgesic	a drug taken for its calming or sleep-inducing effect
f. antibiotic	preventing the growth of disease-causing microorganisms

# Pronunciation

/əˈləːdʒɪk/

/ˈdraʊzi/

/ˌɪntrəˈviːnəs/

Pronunciation

/ɪnˈheɪl/

/ˈstɪmjʊleɪt/

/ˈhɒspɪt(ə)lʌɪz/

/prɪˈskrʌɪb/

/ɪnˈdjuːs/

/ˈəʊvədəʊs/

Adjectives	
a.	drowsy
b.	intravenous
C.	allergic

### Meaning

of a damaging immune response by the body to a substance, especially a particular food, pollen, fur, or dust, to which it has become hypersensitive

causing sleepiness or lethargy

existing or taking place within, or administered into, a vein or veins

Verbs	Meaning
a. hospitalize	raise levels of physiological or nervous activity in (the body or any biological system).
b. induce	bring on a condition artificially, typically by the use of drugs
c. inhale	take an excessive and dangerous dose of a drug
d. overdose	(of a medical practitioner) advise and authorize the use of (a medicine or treatment) for someone, especially in writing
e. stimulate	admit or cause (someone) to be admitted to hospital for treatment
f. prescribe	breathe in (air, gas, smoke, etc.)

4. Match each word in the box to a stress pattern in the table below and check with your partner.

laxative	sedative	antiseptic	induce	emetic	inhale
analgesic	overdose	allergic	intravenous	drowsy	prescribe

•.	.•	•	 
		laxative	

5. Complete the sentences below with a word from the box.

allergic	emetic	stimulate	hospitalized
antiseptic	inhale	analgesic	prescribe

- a. Patients .....a topical anesthetic that numbs their nasal passages and throat.
- b. A calcium supplement can ..... bone tissue growth.
- c. Paracetamol is a common .....
- d. Doctors are authorized to ..... medication to patients.
- e. By effectively using an ....., bacteria are killed, and disease is less likely to spread.
- f. Asthmatics often have an .....reaction to dust.
- g. The child was immediately given an .....to ensure he did not absorb the poison he drank.
- h. The child needed to be .....for observation following the accident.

6. Use the following words in sentences as if you were a nurse speaking to a patient or a doctor.

antibiotic	sedative	induce	laxative
drowsy	overdose	intravenous	

For example: Nurse speaking to a patient "The doctor has prescribed this antibiotic for your infection. It needs to be taken three times a day with food."

a. b. c. d. e. f.



1. Look at the procedure below for 90 seconds. Try to remember as many details as possible

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- 2. Working with a partner and without looking at the poster on the previous page, answer the following questions.
  - a. What is the purpose of the poster?
  - b. Which organisation produced the poster?
  - c. Who is the poster targeting?
  - d. When should this process be followed?
  - e. What is the recommended duration of the procedure?
  - f. How many steps are detailed in the poster?
  - g. How many different ways are the hands rubbed together? Demonstrate with your partner.
  - h. What three things are required to effectively complete the process?
  - i. What verbs are used in steps 0 2?
  - 3. When you have finished, look at the poster to check your answers. Underline the verbs in the instructions. What form are the verbs in the poster?
- 4. Re-write the following sentences using the imperative form of the verb.

*Example:* It's a good idea to study for the exam = <u>Study</u> for the exam.

- a. You need to take a ticket to enter the staff carpark.
- b. You should wait here for service.
- c. They recommend that we do not drink the water.

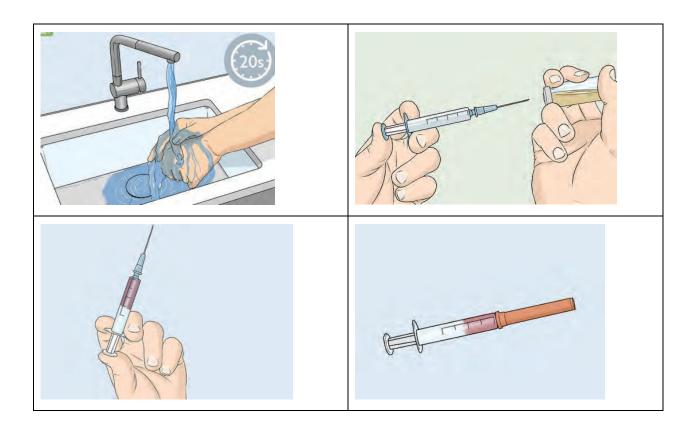
5. Sometimes more information is added to an instruction. It might describe a condition or another action occurring before or after the instruction. The imperative verb is not used in these clauses, it is used in the instruction.

Examples If you drop the injection on the floor, <u>don't use</u> it.

Dry your hands on a towel after rinsing them.

Re-write these instructions using the imperative form.

- a. <u>Students need to read</u> the instructions carefully before starting the exam.
- b. Once you finish the exam, <u>you should hand in</u> your paper and leave the room quietly.
- c. Before entering the secure area, <u>it's necessary to swipe</u> your ID card on the screen.
- 6. With a partner, look at the pictures below and discuss the procedure for <u>preparing</u> an intravenous injection.



 With your partner, read the following instructions and underline all the imperative verb forms. Then put the instructions in the correct order 1 – 10. The first one has been done for you.

#### Preparing an intravenous injection

- a. After pushing the air out, <u>place</u> a sterile cap over the tip of the needle to protect it and place it on a sterile surface until you're ready to use it.
- b. Take out a clean, unused needle and insert the tip into the medicine vial.
- c. Then, gently tap the side of the syringe to knock any air bubbles to the surface
- d. Depress the plunger just enough to press the air out of the syringe.
- e. Draw the correct dosage into the syringe by pulling back on the plunger of the syringe.
- f. Administer the exact dosage prescribed by the doctor only.
- g. Before handling the medication or needle, wash your hands thoroughly with warm water and soap. (1)
- h. Do not allow the prepared needle to come into contact with any non-sterile surface.
- i. Then, rinse your hands and dry your hands completely using a clean towel or clean paper towels.
- j. After you have drawn the required amount of medication into the syringe, turn the syringe so that the needle is pointed up. <sup>13</sup>.

<sup>13</sup> Wikihow. (2020). How to inject into a vein. Retrieved from https://www.wikihow.com/Inject-Into-a-Vein

8. The following instructions explain how to find a vein. With your partner, put the words in each instruction in the correct order. The first one has been done for you.

### How to find a vein

Example: patient / the / ensure / hydrated / is Ensure the patient is hydrated.

the /look/ vein/ on / a / near / arm /the /of /the /elbow / inside/for
around / bring / vein / tourniquet / wrap / surface / arm / to / to / the / the / a / a
their / the / to / hand / open / close / patient / tell
vein / fingers / with / the / your / palpate
veins / warm / a / compress / if / area / visible / aren't / still / the / apply / the / to
rubbing / with / clean / the / vein / a / you / area / alcohol / viable / once / identify / a

9. With your partner, discuss and then write a procedure for inserting and injecting an intravenous injection.

## Inserting and injecting an intravenous injection

## **12.1 Language for Clarifying Information**

1. Look at the pictures below. Discuss in groups what the nurses are doing.



- 2. Look at the following words and write the word type, the first one is done for you.
  - a. Assessment /ə'ses.mənt/

Part of speech: noun

Meaning: evaluation of the patient using patient history, physical examination, laboratory, imaging etc...

What do we need to make sure that the goal is achieved?

.....

b. clinician /klɪˈnɪʃ.ən/

Part of speech .....

Meaning: someone, such as doctor, who is very skilled or has a qualification in an area of healthcare

Is she part of health care team? .....

c. implementation / Im.plI.men'teI.jan/

Part of speech .....

Meaning: putting an instrument or plan into action

Is it a plan or an action? .....

3. Look at some examples of functional language used for asking and giving clarification. With your partner, divide the phrases into two columns. The first one has been done for you.

Could you clarify that please?	Could you put it differently please?	Do you mean?	Sorry, could you?	Sorry, let me explain…
Is that right?	Could you repeat, please?	In other words,	Let me clarify it for you	Let me put it in another way
What I mean is	To say this differently	Could you explain what you mean by?	Let me explain	Could you explain that, please?

Asking for Clarification	Giving for Clarification
Could you clarify that please?	

#### 4. Working in groups of four, read the following dialogue together.

Mrs. Aminah is admitted to the medical ward. She is with her daughter when the nurses do a bed side report at the end of their evening shift.

Nurse 1:	Mrs. Aminah, this is Nurse Wardah, she is the oncoming Nurse that will be your nurse for the next eight hours.
Nurse Wardah:	Good evening, Mrs. Aminah. I am Wardah and I'll take care of you tonight.
Mrs. Aminah:	Glad to see you Nurse Wardah.
Nurse 1:	Mrs. Aminah, we'll be here to do a nursing bed side report. In
	other words, we will check your medical record, your lab results
	and any care we have planned for you.
Mrs. Aminah:	Ok, thank you. Sorry, could you also explain this to my
	daughter? She is concerned about my condition.
Nurse 1:	Of course. We encourage you to ask questions about any
	medical information related to your mother's condition. Ok,
	Nurse Wardah. We can start our bed side report now. This is
	Mrs Aminah, 59 years old. She was admitted to the emergency
	department yesterday complaining of chest pain and breathing
	difficulty. She has no history of allergies. Diagnosed with
	anterior STEMI. How long have you had hypertension Mrs
	Aminah?
Mrs. Aminah:	For about 5 years. We have a family history of hypertension too.
Nurse Wardah:	Can I clarify, how about your chest pain? Are you feeling well for now?
Mrs. Aminah:	Yes, sure. I feel slight pain but overall, I feel good.
Nurse Wardah:	Can you explain to me how much pain you feel on the scale?
Mrs. Aminah:	It is about 2-3.
Nurse 1:	To say this differently, the pain is mild but uncomfortable. Is this right?
Nurse Wardah:	Ok, let me check your line Mrs Aminah. Your IV line is good,
	and so is your catheter. When was the last time the urine was
	removed? It's empty.
Daughter:	About half an hour ago. I removed it because it was almost full.
	Pardon me, could you explain what you mean by STEMI? Is my
	mother going to be ok?

Nurse 1:	Of course. Sorry, let me explain. STEMI is a condition where we
	found the rising of your mother's ECG wave. Do not worry. As
	long as your mother takes the medicine properly, following the
	care plan, she will be fine.
	And Nurse Wardah, Mrs. Aminah is scheduled for a full blood
	lab and serial ECG examination tomorrow morning.
Mrs. Aminah:	Does that mean that tomorrow I can walk my way out of the
	room?
Nurse 1:	Not yet. Let me put it in another way. You can't walk because
	your heart hasn't fully recovered yet. Tomorrow we will learn
	how to move gradually.
Nurse Wardah:	Ok, Mrs. Aminah. You may take a rest now. I'll come to take
	blood samples tomorrow morning. Good night.

- 5. Reread the text. Underline the examples of language asking for and giving clarification. Did you find the same examples as your partner?
- 6. With a partner, write a short dialogue between a patient and a nurse in a hospital where the patient has been admitted. The patient initially arrived with a fever and feeling dizzy.
  - a. The patient would like to know the cause of their symptoms.
  - b. The nurse would like to know how the patient is feeling after receiving medication.

Practise your dialogue with your partner, taking turns to be the patient and the nurse.



# **12.2 Grammar for Giving Reasons**

1. Look at the picture below and discuss the questions with your partner.



- a. What is the nurse doing?
- b. What are her responsibilities during an examination?
- c. Why is it important that she records the results of an examination?
- d. Who is the information for?

2. Read the following dialogue. Discuss any unfamiliar vocabulary with your partner.

Nurse Diyan, a nurse in Kasih Ibu Hospital, entered the room with an observation sheet. She is speaking to Mrs Ainun who is there with her daughter.

Nurse Diyan:	Good afternoon.
Mrs. Ainun:	Good Afternoon, Nurse Diyan. Do you want to check my
	daughter's vital signs?
Nurse Diyan:	Yes, I do because I need to write a few things on this
	observation sheet.
Mrs. Ainun:	Do I need to wait outside?
Nurse:	Since you are family, you can stay here. Because of your
	daughter's condition, I will need to ask you some questions too.
Mrs. Ainun:	Ok. And can I ask you some questions too?
Nurse:	Did the doctor explain to you your daughter's condition?
Mrs. Ainun:	The doctor has explained because of the seriousness of her
	condition, she must stay in hospital. However, there are some
	things that I don't understand.
Nurse:	Ok. I understand. I will check her vital signs first.
Mrs. Ainun:	So, how is my daughter?
Nurse:	Let me see. Her blood pressure today is 160/900 mmHg, still
	high. Her pulse is 90x/minute, her respiratory rate is
	18x/minute. It is normal and her temperature is 37.8°C. This is
	good as she has improved compared to last night.
Mrs. Ainun:	So, what happened to her exactly?
Nurse:	Well, as the doctor told you. Your daughter suffered a head
	injury because of the accident. Based on the data that I read in
	the medical record, your daughter had a very hard impact on
	her head because she was bounced and did not wear a helmet
	when her motorcycle was hit from behind.
	As the impact was so hard, she now has swelling in the brain.
	As long as the swelling is not treated your daughter will not
	wake up.
Mrs. Ainun:	Ok, I got it. And why are her hands tied?
Nurse:	Oh, your daughter's hands are restrained because she was
	restless and without her knowing she was trying to pull the IV
	line and catheter.

3. In this dialogue, the Nurse explains what she is doing as well as giving reasons for what she is doing. Review the following explanations for clauses which express reason.

How to express reason with because, because of, since and as
<b>BECAUSE</b> (conjunction) is used to link two clauses. It is followed by a subject and verb
I was worried <b>because</b> <u>Nurse Sally was</u> late. I was tired because <u>I did</u> the night shift.
<b>BECAUSE OF</b> (preposition) + noun This is a preposition, so it is not followed by a clause with a verb. It is followed by a noun or noun phrase
She was late <b>because of</b> <u>the traffic</u> I was tired <b>because of</b> <u>the hard work</u> I did during the night shift.
<b>AS / SINCE</b> (conjunction) These conjunctions are formal. In a less formal language we would use SO
<b>As</b> it's raining again, we'll have to stay home. (= It was raining again, so we have to stay home)
<b>Since</b> it's too late, I think we should stop now (= it was too late, so I think we should stop)
We often use as and since when we want to focus more on the result than the reason. These clauses often begin the sentence:
Since my patient spoke no Indonesian, we had to communicate in English
<b>Since</b> it's too late, we should leave the patient's blood pressure check for tomorrow. <b>As</b> everyone already knows each other, there's no need for introductions.

4. Look at the dialogue again. Underline all the examples of language which express reason. How many did you find? Check with your partner.

- 5. Review your understanding by choosing a suitable connector such as "because of, because, since, as" for each sentence. Sometimes there is more than one answer.
  - a. ..... she is getting better, her IV line was removed.
  - b. She was admitted to the hospital ..... her high body temperature
  - c. The physician suggested he have a CT scan ...... he complained of regular headaches.
  - d. The nurse applied an ointment on his hand ..... the itching.
  - e. ..... breathing is something we do automatically, we rarely think about it.
  - f. She spoke quietly ..... she didn't want the patient to hear.
  - g. ..... a lot of information is recorded digitally, there's no need for paper record keeping any more.
  - h. Are you feeling unwell ...... you ate too much?
- 6. Rewrite the following sentences using a suitable connector. There may be more than one way to connect these sentences.
  - 1. The nurse suggested he drink a glass of warm water. He is dehydrated.

.....

b. He had a shortness of breath. The nurse gave him oxygen.

.....

c. The baby can now breathe independently. The baby was moved from Intensive Care to the baby room.

.....

d. His condition is getting worse. He was admitted to the intensive care unit.

.....

.....

e. His condition is worsening. He will need to be referred to another hospital.

- 7. In small groups, read the statements below. Discuss your opinions and give reasons why using connectors.
  - a. In your opinion, why are there more female nurses than male?

I believe there are more female nurses **because** women have traditionally looked after others and they have a very caring manner.

- b. Why is being a team player so important in healthcare industry?
- c. Do you think that a hospital could function without nurses?
- d. Is nursing a rewarding job?
- e. Being a nurse can sometimes be stressful.
- f. Why is a nurse's role important during a patient's treatment?



## 12.3 Read about Avoiding Common Medical Documentation Errors

1. Look at the following picture. What documentation is commonly used by nurses in a hospital?



- 2. Documentation plays an essential role in the nursing process. Discuss with your group the reasons for clear and accurate documentation in the following contexts.
  - a. Communication between healthcare workers
  - b. Communication to individuals or family
  - c. Decision making
  - d. Legislation

3. Scan the following summary about nursing documentation. What benefits of documentation in a nursing context are listed? Underline them in the text. Are they the same or different to your answers in exercise 2?

Documentation is the process of preparing a complete record of a patient's care and is vital tool for communication among health care team members. Accurate, detailed documentation shows the extent and quality of care that nurse provide, the outcomes of that care, and treatment and education that the patient still needs. Thorough, accurate documentation decreases the potential for miscommunication and errors.

Documentation is a valuable method for demonstrating that the nurse has applied nursing knowledge, skills, and judgement according to professional nursing standards. In a court law, the client's health record serves as the legal record of the care provided to that patient. Accrediting agencies and risk managers use the medical record to evaluate the quality of care a patient receives. Insurance companies use documentation systems to verify the care received. Nursing documentation in the medical record may also be used for research and education as well as for quality improvement programs.

4. Decide on the meaning of each word by choosing the correct definitions below.

accuracy (n) / æk.jə.rə.si/

- a. happening by chance
- b. a situation in which a fact or measurement is not completely correct
- c. the fact of being exact or correct

liability (n) / laɪ.ə bɪl.ə.ti/

- a. someone that causes you a lot of trouble,
- b. being legally responsible for something
- c. when someone must make the decision

malpractice (n) / mæl præk.tɪs/

- a. failure to act correctly or legally when doing your job
- b. an agreement in which you pay a company money
- c. if you lose or damage something, or have an accident, injury

- a. to prove that something is not true
- b. to prove that something exists or is true
- c. to prove a person or an argument to be wrong<sup>1</sup>
- 5. Scan the article below. Check any new vocabulary with your partner and discuss together.

#### Nursing Documentation: How to Avoid the Most Common Medical Documentation Errors

When it comes to nursing documentation, knowing how to accurately document a patient can literally mean life or death. Some of the most common medical documentation errors can also be the most disastrous. Plus, improper documentation can open up an employer to **liability** and **malpractice** lawsuits. For nurses, who are on the front lines of defense in the medical field, being adequately trained early on proper documentation can help avoid such medical errors, save lives and help protect their employers. So how can we avoid the most nursing documentation errors, to ensure patients receive appropriate, and, possibly life-saving care? By ensuring our nursing students are getting the training they need on electronic medical records (EMRs) – also known as electronic health records (EHRs) – while still in school.

EMRs are a digital version of a patient's paper chart. They're easy to find, search, and update, and provide tools like reminders, alarms, and automated processes that improve clinical **accuracy**. U.S. healthcare organizations have been transitioning from paper-based medical records to electronic health records for over a quarter of a century. They allow organizations to minimize the high rate of medical errors occurring throughout the healthcare industry by **verifying** information and acting as a tool for increasing patient safety and decreasing the overall cost of healthcare.

By providing the EMR training software to these students to use in the classroom, they can practice various nursing simulation scenarios and become proficient in clinical simulation in a safe, guided environment overseen by an instructor.

<sup>1</sup> Cambridge Dictionary. (2020). Dictionaries. Retrieved from https://dictionary.cambridge.org/dictionary/

Because the truth is that the majority of medical errors don't occur as a result of incompetence or recklessness by nurses or healthcare staff. They occur due to faulty systems and fragmented processes – with faulty documentation being a main culprit.

#### Here are some of the top 9 types of medical documentation errors:

- 1. Sloppy or illegible handwriting
- 2. Failure to date, time, and sign a medical entry
- 3. Lack of documentation for omitted medications and/or treatments
- 4. Incomplete or missing documentation
- 5. Adding entries later on
- 6. Documenting subjective data
- 7. Not questioning incomprehensible orders
- 8. Using the wrong abbreviations
- 9. Entering information into the wrong chart

Take #1 above, for example – sloppy or illegible handwriting. This can lead to a patient care provider receiving mixed messages about the patient's history and directives. Some common transcription mistakes, for example, include typing "hyper" instead of "hypo," or vice versa, or typing "she" instead of "he." A wrong diagnosis can get embedded in a patient's chart and not only affect their care, but the error can affect when that patient changes insurance companies and a preexisting condition is noted.

Also, a combination of the above common nursing and medical documentation errors can also lead to medication errors. Consider this: every day, at least one death in the U.S. happens a result of a medication error, and approximately 1.3 million people annually are injured due to medication errors. Nurses face more challenges today than ever, and, on top of increasing patient care demands, they must adapt to new technology to help them handle the workload. It is incumbent upon nursing schools to ensure tomorrow's nurses are adequately trained on EMRs. If nurses aren't comfortable with and proficient in the technology when they encounter EMRs or EHRs on the job, chances for nursing documentation error skyrockets.<sup>2</sup>

6. Based on the text "**Nursing Documentation**", answer these questions with True (T) or False (F). Check your answers with your partner.

a.	Being trained early on proper documentation can save patient lives.	T/F
b.	EMRs are different to a patient's paper chart.	T/F
C.	Paper-based medical records are becoming less popular and increasingly replaced with EMRs.	T/F
d.	EMRs result in organizations recording higher rates of medical errors.	T/F
e.	EMRs decrease the overall cost of healthcare.	T/F
f.	Training in EMR software should be done in school, in a simulated environment.	T/F
g.	Poor and careless handwriting is a common medical documentation error.	T/F
h.	There isn't much difference between writing "hyper" and "hypo".	T/F
i.	Using the wrong abbreviation is a kind of medical documentation error.	T/F
j.	Medical documentation errors can also lead to deadly medication errors.	T/F
k.	Nurses do not need to adapt on new technology to handle their workload.	T/F

7. Based on the text again, complete the summary by filling in the blanks using words from the box

professional	signing	documentation	important	electronic
communicate	include	keep	provide	statement
interprofessiona Documentation - client's progress care that is (5) _ Nurses are requ practice. Failing	I (2) - whether pap and (4) ired to make a to keep record ent that the me	) that occurs per, (3) , a with other care to a client. and (6) ds as required, falsify ember knows (9)	within the client udio or visual - is o providers. It also re _ records of their (` ing a record, (8) _	health record. used to monitor a eflects the nursing 7) or

8. Working in pairs, imagine you are explaining the importance of bedside nursing documentation reports to a new nursing student. What are you going to say?

Take turns in the role of the nurse and the nursing student and role play your conversation to the class.

# **13.1 Language for Discharging a Patient**

1. Describe the scenes in the pictures below with your partner.



2. Match the words to the definitions.

1. surgery	a. a medicine, or a set of medicines or drugs, used to improve a particular condition or illness
2. pain	<ul> <li>b. the treatment of injuries or diseases in people or animals by cutting open the body and removing or repairing the damaged part</li> </ul>
3. medication	c. a feeling of physical suffering caused by injury or illness

3. Repeat each word together after your teacher

/peɪn/
condition ( <i>noun)</i> /kənˈdɪʃən/

- 4. Read the following and decide where the conversation takes place.
  - a. in the ward of a hospital
  - b. in front of the hospital
  - c. at the nurses' station

Doctor:	Alright, Ms. Adams, we got you all set. Your nurse will be in	
	shortly.	
Mr. Adam:	Are you doing okay?	
Mrs. Adam:	Yeah, honey, I'm alright, thank you.	
Nurse:	Hi, Ms. Adams. How are you feeling this morning?	
Mr. Adam:	I'm glad the surgery is over. I'm pretty sore.	
Nurse:	I know you are, Ms. Adams. Can you rate your pain for me, please?	
	You know that scale where one means it hurts just a little bit and	
	ten is the worst pain you've ever felt? What's your pain right now?	
Mrs. Adam:	Oh, I'd say it's at least a seven or an eight.	

Nurse: Well, the doctor has ordered some pain medicine to help you. We are going to give this to you now so that it's working when we get you out of bed a little bit later. It's really important to get you moving so that you don't develop any blot clots or trouble with your breathing.

Mrs. Adam: I don't want that to happen.

- Nurse: I agree. And while you're here with us for the next couple of days, we want to make sure that you and your family feel comfortable with our daily routine so that you can continue to work on it on your own once you're discharged. That's why we have the word IDEAL written out on the board here. It stands for: Include, Discuss, Educate, Assess and Listen. It really helps us to work together to begin preparing for your discharge.
- Mr. Adam: Discharge? Already? I'm not ready to take her home. She's in a lot of pain, and I'm not a nurse.
- Nurse: I understand, but talking about this now and throughout your hospital stay will help to ensure that when Ms. Adams is ready for discharge, you both feel comfortable with what you need to do to continue to help her heal and get better.
- Mr. Adam: Okay, well, getting her stronger is my goal too. So, we're a team?
  Nurse: Yep. Let's begin working on this today. Now, as you said, Mr.
  Adams, your wife is in a fair amount of pain. One of the things that we can do is to get her up and walking after her pain medication has taken effect.
- Mrs. Adam: Wait, I don't know if I'm really ready to do that today. I don't think you understand how sore I am.
- Nurse: Well, this pain medicine is pretty strong, and it usually works really well for most patients. We'll make sure your pain is under control before we get you out of bed.
- Mrs. Adam: I would appreciate that. And, you know, they've been giving me a lot of fluids in this IV, so I go to the bathroom pretty often. I want to make sure I can go to the bathroom before we walk in the hallway.
   Nurse: Absolutely.

Mr. Adam:	Can we actually plan when we'll do this? I need to go into the office		
	for an hour or two, but I want to be here to help. Cause I think		
	you're right. That will make me feel much better at home when it's		
	just the two of us.		
Nurse:	Sure. Let's write out a timeline for today.		
Mr. Adam:	Honey, the kids are coming to visit around 2 o'clock so you don't		
	want to be walking then. That's the kind of thing that you would		
	need to know, right?		
Nurse:	That's exactly what I mean. You were due to be given some		
	medications at 11 o'clock. We can give you your pain medicine at		
	noon right after lunch. It should be helping by 1 o'clock, so you		
	could take your walk then. How does that sound?		
Mr. Adam:	Works for me. I could be back by 1 o'clock.		
Nurse:	Great, that works out perfectly.		
Mrs. Adam:	It does. After I walk, I can rest and then watch my favorite show		
	too. <sup>3</sup>		

5. Put these words below into the column according to their pronunciation.

trouble	doctor	blot	clot
under	discharge	discuss	under
hall	come	lunch	walk

IN	/a:/
trouble	doctor

<sup>3</sup> AHRQ Patient Safety. (2015) CUSP: IDEAL Discharge. Retrieved from https://www.youtube.com/watch?v=3C5EWVbIU5k

6. Read the dialogue again and identify language which expresses the following functions.

Reassuring
It'll be fine.

#### 7. Research the discharge planning plan for one of the medical conditions below.

- a. discharge plan for patient who has been treated for gastroenteritis
- b. discharge plan for patient who has been treated for dengue hemorrhagic fever
- c. discharge plan for patient who has been treated for typhoid fever
- d. discharge plan for patient who has been treated for diarrhea

Write a 20-line dialogue which depicts a nurse explaining to a patient how to take their medications and how to look after themselves when they get home.

The patient will be very insecure about going home and will express doubts. The nurse will need to explain procedures clearly and use reassuring language. Write the dialogue with a partner. Role play the dialogue with your partner.

# **13.2 Read about Planning for Patient Discharge**

1. In a group, look at the pictures, then answer the questions below.

- a. What should you do before discharge planning?
- b. What shouldn't you do before discharge planning?



Educating a patient



Checking vital signs



Doing an exercise



Runaway patient



Angry patient

2. Look at the vocabulary below and practice your pronunciation with your teacher.

transition (n) /trænˈzɪʃ.ən/ preparation (n) /prep.ərˈeɪ.ʃən/ assessment (n) /əˈses·mənt/

3. Now match the word with its definition.

1. transition	a. a judge or decide the amount, value, quality, or importance of something
2. preparation	b. the things that you do or the time that you spend preparing for something
3. assessment	c. the things that you do or the time that you spend preparing for something

- 4. Read the text and decide what the main idea of the passage is. Then circle the best title from the three choices below and write it in the space provided.
  - a. Advising a Care Plan
  - b. Assessing Care Needs
  - c. Post-Hospital Care: What to Do Before Transitioning Back Home

When a relative goes into hospital, for something routine or an unplanned visit, it can be a worrying time. As well as considering the treatment and care they receive, you must think about what will happen when it is time for them to return home. How will they transition?

Your relative's care should not end the minute they leave hospital. Plans should be in place to help them with post-operative care at home. Each hospital will have its own policy and arrangements for discharging patients and should provide information about this. However, here are some general guidelines to help you prepare and ask the right questions.

#### Assessing care needs

If your relative has been seriously ill, undergone surgery, or has suffered a fall, they may well require care once they return home. As part of the discharge process, your relative should be allocated a member of hospital staff who will assess their needs and discuss a suitable care package to help once they are discharged.

If your relative's care needs have changed substantially from before their hospital stay, they should get a needs assessment. This assessment is free and forms the basis of any and all follow-up care that your relative is found to be entitled to.

This kind of assessment can recommend things like:

- \* Walking frames.
- \* Help from a career.
- \* Changes to your relative's home to help them manage day-to-day tasks.

The needs assessment may also recommend moving your relative into a care home. The hospital staff can help to arrange the assessment, either while your relative is still in hospital or before their six weeks of intermediate care is up. Once your relative's needs have been assessed, staff should discuss the options for meeting them and should produce a care plan detailing the assessed needs.

Some of the questions or observations the needs assessment covers are:

- \* Can your relative manage steps or stairs?
- \* How do they manage with personal care, such as bathing and washing?

- \* Can your relative prepare your own meals?
- \* Is any financial support required?

It can take several days to plan a discharge, especially if a number of different services need to be arranged. But it will ultimately provide a much smoother transition for your loved one if staff know exactly what is required to help them stay happy and healthy once they return from hospital.

#### Intermediate care and re-enablement

If your relative no longer needs to be in hospital, but still requires extra support to aid recovery, it is called Intermediate care. It lasts for up to six weeks and can be provided in your home or in a residential setting. When this period of intermediate care or reenablement finishes, your relative will be assessed to see whether any ongoing social care or NHS support is required.

#### Before discharge

Before your relative is discharged from hospital the following requirements must be met:

- \* Support at home has been agreed and is in place.
- \* Services required for recovery or care are ready to start.
- \* Any home adaptations have been made including appropriate equipment delivered or installed.

Before your relative leaves hospital for home a member of staff who is responsible for overseeing the discharge should make sure:

\* They have clothes to go home in, money and front door keys.

\* You or someone else is collecting your relative, or a taxi or hospital transport has been booked.

\* You have a copy of their plan.

\* You understand any new medicines they've been given, and you have a supply to take home.

\* You've been shown how to use any equipment; aids or adaptations they need.

\* Their GP knows about their discharge and any extra help you need has been arranged.

If your relative is being discharged to a care home, the care home should also be told the date and time of your discharge and have a copy of your care plan.

#### What will a care plan cover?

A care plan details the health and social care support your relative needs after they leave hospital. You and your relative (if they are able) should be fully involved in making this plan. The care plan should include details of:

- \* Treatment and support your relative will get when they're discharged.
- \* Who will be responsible for providing support, and how to contact them.
- \* When, and how often, support will be provided.
- \* How the support will be monitored and reviewed.
- \* The name of the person who is coordinating the care plan.
- \* Who to contact if there's an emergency or if things don't work as they should.
- \* Information about any charges (if applicable) to medications, treatments etc.

#### After discharge

Once your relative has returned home, been placed in a suitable care home or arrived at the place they will fully recover the care they receive should be monitored and reviewed as set out in the care plan prepared for them. The care plan should also include details of who to contact if things don't work as planned. If the care plan includes any services from a local authority, it should include provision to check that their care package is working well within two weeks of your discharge. However, If your relative lives alone, this should take place within the first few days of discharge. After the initial review, the care plan should be reviewed at least annually. <sup>4</sup>

<sup>4</sup> Cavendish Professionals Homecare. (2020). Post-hospital Care – What to Do Before Transitioning Back Home. Retrieved from https://cavendishhomecare.com/help-centre/advice-and-guidance/what-to-do-before-transitioning-back-home/

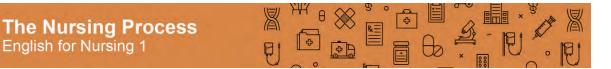
- 5. Answer these questions based on the text.
  - a. What shouldn't do before the discharge?
  - b. What should a care plan cover?
- 6. On your own, choose the right answer by deciding if you Should or Shouldn't follow the statements. Check your answers with a partner.
  - a. Plans done to help them with post-operative care at home
     (Should/Shouldn't)
  - b. Hospital provides information about its own policy and arrangements for discharging patients (Should/Shouldn't)
  - c. Allocating a member of hospital staff who will assess their needs and discuss a suitable care package to help once they are discharged (Should/Shouldn't)
  - d. When the relative's needs have been assessed, staff decides the options for meeting them and produce a care plan detailing the assessed based on the patient's want (Should/Shouldn't)
  - e. The care plan made including details of anyone the relatives can meet (Should/Shouldn't)

7. Find the words below in the reading text and match them based on the definition.

1. discharge	a. not planned or expected
2. unplanned	b. judging or deciding the amount, value, quality, or importance of something
3. assessing	c. a change from one form or type to another, or the process by which this happens
4. treatment	d. the things that you do or the time that you spend preparing for something
5. care plan	e. the act of observing something or someone
6. manage	f. once every year
7. observation	g. the way you deal with or behave towards someone or something
8. preparation	h. to succeed in doing or dealing with something, especially something difficult
9. transition	<ul> <li>the plan of protecting process for someone or something and providing what that person or thing needs</li> </ul>
10. annually	j. to allow someone officially to leave somewhere, especially a hospital

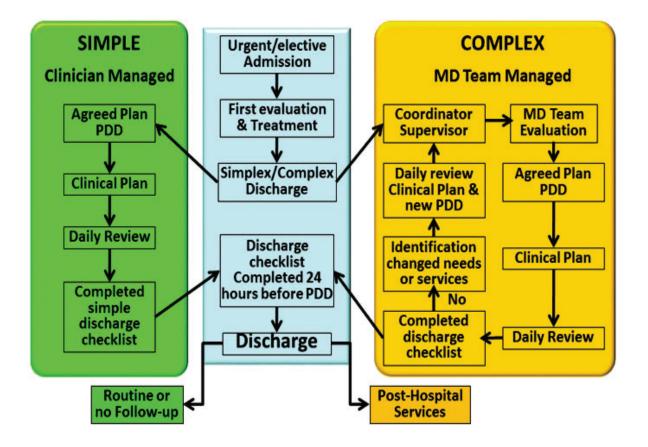
8. With a partner, imagine you are a nurse at a hospital. You are talking to a patient over the phone who is about to come in for minor surgery.

Write a short dialogue advising them what they should and shouldn't do when they are in the hospital. Roleplay your phone conversation to another pair or share with the class.



### **13.3 Read about Discharge Planning**

1. With another student, examine the steps in the diagram below. Compare the processes for simple and complex discharge of patients. Take turns to explain the procedures for both types of patient discharge.



- 2. Scan the article below and decide on the best title for the text from the choices. Write the title in the space provided at the top of the article.
  - a. Patient Planning
  - b. The Importance of Effective Discharge Planning
  - c. Supporting Discharged Patients

.....

Planning for a patient's discharge from hospital is a key aspect of effective care. Many patients who are discharged from hospital will have ongoing care needs that must be met in the community. This ongoing care comes in many forms, including the use of specialised equipment at home such as a hospital-type bed, daily support from carers to complete the activities of daily living, or regular visits from district nurses to administer medication.

There is a wide variety of care available in the community, but it needs to be planned in advance of the patient's return home, to ensure that there is no gap in the provision of care between the discharge from hospital and the initiation of community services. Furthermore, information about the patient must be handed over from the hospital team to the community team so an informed plan of care can be put into place.

Discharge planning is the process by which the hospital team considers what support might be required by the patient in the community, refers the patient to these services, and then liaises with these services to manage the patient's discharge. Poor discharge planning can lead to poor patient outcomes and delayed discharge planning can cause patients to remain in hospital longer than necessary, taking up valuable inpatient beds when they could be more easily and comfortably cared for in the community.

While the guideline committee affirmed the value of discharge planning based on experience, they wanted to review any evidence available about the efficacy and cost implications of discharge planning for patients following a medical emergency. <sup>5</sup>

<sup>5</sup> National Institute for Health and Care Excellence. (2018). Discharge planning. Retrieved from https://www.nice.org.uk/guidance/ng94/evidence/35discharge-planning-pdf-172397464674

3. Decide on the meaning of each word by choosing the correct definitions below based on how each word is used in the text.

#### discharge (v) /dɪs tʃaːdʒ/

- a. to give somebody official permission to leave the police or the armed forces; to make somebody leave the police or the armed forces
- b. to allow somebody to leave hospital because they are well enough to leave
- c. to allow somebody to leave prison or court

#### administer (v) /əd mınıstə/

- a. manage and be responsible for the running of an organisation
- b. give or dispense something
- c. to give help to make the life of others easier

#### ensure (v) / ɪn ʃʊə /

- a. to make someone less fearful
- b. to make sure that what has been planned happens
- c. to protect against attack

#### initiation (v) /I nIJI eIJn/

- a. the introduction of someone to a particular activity or skill
- b. a ritual admitting someone into an organisation
- c. the beginning or enactment of a plan

#### liaise (v) /lɪˈeɪz/

- a. a secret connection
- b. act as a link to communicate between different groups
- c. form a friendship

#### outcomes (n) /ˈaʊtkʌm/

- a. the results of something
- b. the conclusion of a discussion
- c. the continuation of something that must be done.

#### affirm (v) /əˈfəːm/

- a. to validate someone's feelings
- b. to make something emotionally uplifting
- c. to uphold the importance of something
- 4. Match the words below based on the definitions of the text.

1. equipment	a. very useful or important
2. provision	<ul> <li>items needed for a particular purpose or activity</li> </ul>
3. medication	<ul> <li>c. a person who stays in a hospital while receiving treatment</li> </ul>
4. valuable	<ul> <li>a drug or another form of medicine taken to prevent or to treat an illness</li> </ul>
5. inpatient	<ul><li>e. the act of supplying somebody with something</li><li>f. that they need or want; something that is supplied</li></ul>

5. Choose the right answer by circling True (T) or False (F) below based on the text.

a.	Forward planning is central to a patient's discharge from	Т	F
	hospital.		
b.	Ongoing care is defined by regular visits from nurses.	Т	F
C.	Planning in advance ensures a gap in the provision of	Т	F
	care.		
d.	Poor discharge planning can result in poor patient	Т	F
	outcomes.		

- 6. Write short answers to the following questions in the space provided.
  - a. Why may patients require a discharge plan?

.....

.....

b. List 4 forms of ongoing patient care.

.....

c. Who is involved in the discharge planning process?

.....

d. Why does discharge planning need to be done on time?

.....

7. Examine the Patient Discharge Form for a patient suffering from emphysema and COPD. With a partner research the conditions and prepare a simple discharge plan.

Patient Name:
Medical Record Number: EFN8439200
Admission Date:
Discharge Date:
Attending Physician:
Condition on Discharge:
Final Diagnosis: emphysema, COPD
Procedures:
History of Present Illness:
Discharge Medications:
Discharge Instructions: <sup>6</sup>

<sup>&</sup>lt;sup>6</sup> Word Templates Online. (2020). Discharge Summary Forms. Retrieved from htps://www.wordtemplatesonline.net/discharge-summary-forms-general-format/

#### The Nursing Process English for Nursing 1

## 13.4 Vocabulary to Talk about Discharge Planning

1. One of the responsibilities that you may have as a nurse is to help plan for patient discharge. Discuss the following questions with a partner.

Patient discharge is....

- a. the release of a patient from the hospital
- b. the release of a patient from taking medication
- c. a patient releasing bodily fluids
- d. the release of information to a patient

The final decision for patient discharge is made by ...

- a. the patient themselves
- b. the nurse on duty
- c. the attending physician responsible for the patient
- d. the family

It is important to make sure the patient is safely discharged so...

- a. the chance that the patient will have to be readmitted is minimized
- b. the hospital can have as many free beds as possible
- c. patients can be looked after by family at home

The overall discharge process needs to take into consideration...

- a. the patient's overall health condition,
- b. their living situation
- c. their ongoing access to care
- d. all of the above

2. Read the following passage. With your partner, decide what situation is being discussed in the text above. What kind of documentation is discussed?

#### Leaving the hospital

A trip to the hospital can be an intimidating event for patients and their families. As a **caregiver**, you are focused completely on your family member's medical treatment, and so are the hospital staff. You might not give much thought to what happens when your relative leaves the hospital. Yet, the way this transition is handled—whether the discharge is to home, a **rehabilitation** ("rehab") facility, or a nursing home—is critical to the health and well-being of your loved one. Studies have found that **improvements** in hospital discharge planning can dramatically improve the outcome for patients as they move to the next level of care.

Patients, family caregivers, and healthcare providers all play roles in maintaining a patient's health after **discharge**. And although its a significant part of the overall care plan, there is a surprising lack of consistency in both the process and quality of discharge planning across the healthcare system.

So, what are the keys to a successful transition from hospital to home? Caregivers should be provided with checklists to help ensure the best care for a loved one. If you are a caregiver, you play an essential role in this discharge process: you are the **advocate** for the patient and for yourself.

#### What Is Discharge Planning?

Only a doctor can authorize a patient's release from the hospital, but the actual process of discharge planning can be completed by a social worker, nurse, case manager, or other person. Ideally, and especially for the most complicated medical conditions, discharge planning is done with a team approach.

In general, the basics of a discharge plan are:

- Evaluation of the patient by qualified personnel
- Discussion with the patient or his representative
- Planning for homecoming or transfer to another care facility
- Determining whether caregiver training or other support is needed
- **Referrals** to a home care agency and/or appropriate support organizations in the community

Arranging for follow-up appointments or tests

The discussion needs to include the physical condition of your family member both before and after **hospitalization**; details of the types of care that will be needed; and whether discharge will be to a facility or home. It also should include information on whether the patient's condition is likely to improve; what activities he or she might need help with; information on medications and diet; what extra equipment might be needed, such as a wheelchair, **commode**, or oxygen; who will handle meal preparation, transportation and chores; and possibly referral to **home care** services<sup>7</sup>.

#### 3. The words below can be found in the text 'Leaving the Hospital'.

Based on how the words have been used in the text, match the words with a definition below

rehabilitation (n)	improvement (n)	discharge plan (n)	evaluation(n)	referral (n)
hospitalization (n)	commode (n)	home care (n)	caregiver (n)	advocate (v)

a. When a condition gets better .....

- b. Health and social care services provided to a person in his or her own home by a health visitor .....
- c. A treatment design to facilitate the proccess of recovery from injury or illness to a normal condition as possible .....
- d. A receptacle suitable for use as a toilet .....
- e. Confinement in a hospital as a patient for diagnostic study and treatment .....
- f. Directing a patient to another practitioner with more knowledge
- g. Someone who takes care of a person who is young, sick or old

<sup>7</sup> Family Caregiver Alliance. (2020). Hospital Discharge Planning: A Guide for Families and Caregivers. https://www.caregiver.org/hospital-dischargeplanning-guide-families-and-caregivers

- h. An assessment to determine a person's condition or state .....
- i. A plan of action before someone officially leaves the hospital .....
- j. To speak in support of an idea .....
- 4. Put the words in correct order to make a good sentence. Check your answers together with a partner.

a. booked – clinic – a – into – he – rehabilitation – himself

He booked himself into a rehabilitation clinic.

b. documenting - are - Nurses - for - condition. - the - responsible - patient's *Nurses...* 

c. made - A - evaluation - the - medical - is - by - physician - attending A medical...

d. dehydration – hospitalization – required – is – to – occasionally – combat *Hospitalization...* 

e. maybe - home - a - assistance - nurse. - provided - by - care

Home...

f. with - approach - discharge - is - team - done - a - planning Discharge....

#### 5. Complete the sentences about discharge planning with a word from the table.

observe	include	discharge planner	educate
approach	nursing	treatment	prevent

- a. Discharge planning can ..... future admission.
- b. The nurse should .....the family and the patients as full partnership in discharge planning process.
- **c.** Nurses need to ...... family and patient about the patient's condition in plain language.
- d. Ensuring safe transition from hospital to home requires a systematic...... that include the patient and their family in the discharge process
- e. A day or two before you expect to leave the hospital, ask to meet with your
- f. At the ICU, the nurse needs to ......patient's vital sign
- g. Jeff's mother now lives in a ..... home as he is unable to look after her himself.
- h. A nursing care plan may include both a short or long-term ......plan depending on the condition.



- 1. Discuss with your partner the risks of discharging someone from hospital too early. List some things that could go wrong?
- 2. How would you classify the text below?
  - a. an article in a newspaper
  - b. a report following an investigation
  - c. a personal story in a medical journal

# Mrs. T died in her granddaughter's arms after being discharged too soon with severe stomach pain

'Just as the ambulance left, Mrs. T collapsed and died in her granddaughter's arms.'

#### What happened

Mrs. T, who was in her late 90s, fell ill at home. Her granddaughter called a GP to see her, who diagnosed a bladder infection and also noticed that Mrs. T's stomach was swollen. She became unwell overnight, so her granddaughter called an ambulance who took Mrs. T to hospital.

The ambulance crew also noticed Mrs. T's stomach was swollen. At the hospital Mrs. T was examined by a doctor who ordered a urine test but did not focus on the severe stomach pain she was having. Mrs. T was told she had a bladder infection. She was discharged and the doctor advised her to drink more fluids.

Just after the ambulance had dropped her home and left, Mrs. T collapsed and died in her granddaughter's arms. A postmortem showed Mrs. T had died from an infection in her large intestine and an infection of the tissue that lines the tummy; symptoms of both included abdominal pain.

#### What we found

Mrs. T was very unwell and had the doctor physically examined her stomach, it's highly unlikely that she would have been sent home. If she had been examined, it would have

been clear to Mrs. T's family that she was very ill and that there was a risk of her dying. Instead she was discharged home where she died suddenly, causing Mrs. T's granddaughter a great deal of shock and distress.<sup>8</sup>

3. Decide if the following statements are True (T) or False (F) based on the information in the text. Circle the correct answer.

a.	Mrs. T collapsed at the hospital.	Т	F
b.	Mrs. T became unwell and she called an ambulance.	Т	F
c.	No one noticed anything about Mrs. T's stomach.	Т	F
d.	Mrs. T was diagnosed with intestinal issues.	Т	F
e.	The doctor did not examine Mrs. T's stomach.	Т	F
f.	Mrs. T died from a bladder infection.	Т	F

4. Write a 50-word summary of the report about Mrs. T.

<sup>8</sup> Parliamentary and Health Service. (2016). A report of investigations into unsafe discharge from hospital. Retrieved from Ombudsman https://www.ombudsman.org.uk/sites/default/files/page/A%20report%20of%20investigations%20into%20unsafe%20discharge%20from%20hospital.pdf

- 5. Identify the parts of the text which correspond to the descriptions below. Check your answers with your partner.
  - a. a report on what happened and recommendation for what should have been done
  - b. description of the events
  - c. summary in one sentence of the story
  - d. a dramatic quotation
- 6. Using the structure of the text as a model, write your own report of a discharge story which did not go according to plan. Your text should contain the following sections.
  - a. dramatic quote
  - b. what happened and where it happened
  - c. what the outcomes were
  - d. what recommendations were made after an investigation

Swap your writing with a partner and give them 3 ideas on how to expand on the ideas in their report.

# **Notes** English for Nursing 1



Notes	

Notes	

Notes	



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