МІНІСТЕРСТВО ОСВІТИ І НАУКИ УКРАЇНИ ДЕРЖАВНИЙ ВИЩИЙ НАВЧАЛЬНИЙ ЗАКЛАД «УЖГОРОДСЬКИЙ НАЦІОНАЛЬНИЙ УНІВЕРСИТЕТ» КАФЕДРА ІНОЗЕМНИХ МОВ

АНГЛІЙСЬКА МОВА ДЛЯ СТУДЕНТІВ СПЕЦІАЛЬНОСТІ «СЕСТРИНСЬКА СПРАВА»

ENGLISH FOR STUDENTS OF "NURSING" SPECIALITY

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Мета методичних рекомендацій — забезпечити практичне оволодіння студентами лексичними та мовленнєвими моделями, необхідними для вільного спілкування англійською мовою за фахом. Матеріали методичних рекомендацій сприятимуть оволодінню навичками та вмінням читання, мовлення (діалогічного і монологічного) та письма на фахову тематику. Методичні рекомендації призначені для широкого кола читачів: слухачів курсів іноземних мов, студентів та аспірантів, викладачів вищих навчальних закладів.

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ПЕРЕДМОВА

З прискоренням глобалізації і поширенням міжнародних ділових зв'язків України з іншими державами на політичному та економічному рівнях зростає потреба у висококваліфікованих фахівцях, які здатні вільно володіти основами професійного іншомовного спілкування. У таких умовах важливим є усвідомлення майбутніми фахівцями різних галузей необхідності їх майбутніх зв'язків із міжнародним середовищем, а одним з першочергових завдань освіти стає якісна підготовка фахівців, здатних до успішної професійної діяльності в межах світової спільноти. В цьому контексті істотно змінюються вимоги до володіння іноземною мовою фахівцями всіх рівнів, першорядного значення набувають практичні навички, що передбачають знання ділової іноземної мови в усному та писемному мовленні, вміння використовувати іноземну мову у своїй професійній діяльності.

Пропоновані методичні рекомендації мають на меті ознайомити з основами іншомовного професійного спілкування, розширити словниковий запас за рахунок спеціальної лексики, виробити комунікативні навички мовлення, навички письма.

Методичні рекомендації складаються з тематичних розділів, кожен з яких містить 1) тексти інформативного характеру, які допоможуть орієнтуватися в певних ситуаціях професійної сфери, 2) лексичний матеріал з найчастіше вживаними мовленнєвими конструкціями відповідної тематики, які допоможуть у побудові діалогів та монологічних повідомлень та 3) систему вправ для успішного засвоєння та вдосконалення комунікативних навичок професійно орієнтованого спілкування.

CONTENTS

Unit 1. I combine nursing with studies	5
Unit 2. The human body	7
Unit 3. Sterile Procedures	
Unit 4. Instruments	12
Unit 5. Disinfectants and Antiseptics	16
Unit 6. At the reception ward	18
Unit 7: Nurse's daily routines	20
Unit 8. Examination of the patient	25
Unit 9. The First Aid	28
Unit 10. How to Write Medical Papers	32
Список використаних джерел та літератури	35

Unit 1. I combine nursing with studies

Active vocabulary

to leave school/ – закінчити школу

to graduate from college/ university — закінчити коледж / університет

to take an interest in — Цікавитися to make up one's mind — вирішити щось

то apply – подавати заяву (про прийом на роботу, до

закладу освіти т. ін.)

applicant _ aбiтурiєнт

to enter university вступити в університет to take up nursing вивчати сестринську справу to devote oneself to присвятити себе чому-небудь

student membership card студентський квиток student assessment record book залікова книжка

library card

in order to become good specialists читацький квиток

to be in the first year, для того, щоб стати хорошим спеціалістом

to be a first-year student/a fresher навчатися на першому курсі

to take a course in ... compulsory courses

elective courses (electives) вивчати (предмет) to attend / to go to classes обов'язкові предмети

to be present at classes обов'язкові курси за вибором

to be absent from classes відвідувати заняття

to skip / miss classes бути присутнім на заняттях seminar бути відсутнім із занять пропускати заняття

tutorial семінар Bachelor (Bachelor's Degree) лекція

Bachelor's degree in nursing практичне заняття

ступінь бакалавра

to sit/take an exam Ступінь бакалавра з сестринської справи

to pass the exam
to fail the exam
to resit an exam
full-time study
part-time study
curriculum
department
cкладати іспит
провалити екзамен
перескладати іспит
денне навчання
навчання
навчальна програма

research work кафедра

науково-дослідна робота

I. Read and translate the text.

I Study at the Medical Faculty of UzhNU

At first let me introduce myself. My name is I have finished secondary medical school. Now I am a student of the Medical faculty of UzhNU. I want to be a nurse and I'm currently doing my bachelor's degree in nursing. I will treat people and fight against different diseases. My fellow students and I are in the first year of study. All of us attend lectures, tutorials and seminars regularly

and never miss them. We do our home tasks at the library where we can use any textbook we need. The first-year curriculum includes many subjects. Anatomy is the most important subject this year. Our timetable includes three or four double lessons a day. During our practical classes we carry out experiments or tests in different laboratories. Today, it is very important to study computer science and to do all operations with it. Some of my fellow students are members of scientific circles. They spend much time on research work and get to know more about medicine and its problems. I don't have much spare time, because I have to combine studies and work. I spend most of my free time with friends. We go in for sports, discuss many questions, go to the cinema and arrange parties. Our student life is interesting.

II. Answer the questions.

- 1. Where do you study?
- 2. What year are you in?
- 3. What department do you study at?
- 4. What kind of classes do you have?
- 5. What subjects do you study this year?
- 6. What are your first impressions as a fresher?
- 7. What are your expectations of studying at university?
- 8. Do you have to combine studies and work?
- 9. Do you attend all lectures and tutorials?
- 10. Are you a full-time or part-time student?

III. Word transformation: turn the following nouns into the adjectives using suffix -ic|al.

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Model: chemistry (хімія) - chemical (хімічний) botany (ботаніка) — microbiology (мікробіологія) — histology (гістологія) — anatomy (анатомія) — pharmacology (фармакологія) — physiology (фізіологія) — function (функція) — education (освіта) — profession (професія) —
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IV. Read, translate and play out the dialogue in pairs.

A: I have just finished a secondary medical school and I want to get a Bachelor's degree in nursing.

B: That's a very good idea. It will provide you with better employment opportunities. You may study at the Medical faculty of Uzhhorod National University like I do.

A: What can you tell me about your faculty?

B: Our Medical faculty is one of the best in Ukraine. It trains doctors, nurses and pharmacists.

A: It must be pleasant to study here.

B: Certainly it is. We have well-equipped classrooms and laboratories.

A: Please tell me, what do you do after classes? Do you have time to go to the cinema or concerts? B: Of course, I do. I go in for sports and read books after classes and I go to the cinema on my days off. Besides, I study English.

A: Do you know English well already?

B: No, I can't say that I do. But I'll do everything to master it.

Unit 2. The human body

Active vocabulary

respiratory system дихальна система

сеntral nervous system центральна нервова система peripheral nervous system периферична нервова система cardiovascular system серцево-судинна система кровоносна система digestive system травна система

endocrine systemендокринна системаurogenital systemurogenital system

lungsлегеніbronchus (pl. bronchi)бронхwindpipeтрахеяbrainмозок

spinal cord спинний мозок

nerve нерв

колінний суглоб knee joint burning sensation відчуття печії селезінка spleen skin шкіра liver печінка blood кров heart серце capillaries капіляри arteries артерії veins вени

cardiac output серцевий викид nutrients поживні речовини

stomach шлунок bile жовч

bile ductжовчний протокаgall bladderжовчний міхурpancreasпідшлункова залоза

intestineкишечникtonsilsмигдалиниglandsгланди

bladder сечовий міхур

larynx гортань pelvis таз kidney нирка skeleton скелет skull череп bone кістка throat горло

thyroid gland щитовидна залоза

I. Read and translate the text.

The Human body

Extract from Anatomy course lecture

Welcome to today's lecture. Last week we looked at the respiratory system and how the lungs separate oxygen from other gasses which we breathe. Today, we will be looking at codependence within three of the body's most important systems: the central nervous system (CNS), the cardiovascular system and the digestive system.

The nervous system can be divided into two parts: the central nervous system and the peripheral nervous system. The central nervous system is comprised of the brain and the spinal cord, and is responsible for processing the information which is sent to or received from the peripheral nervous system which is made up of the body's nerves. The brain processes information while the spinal cord acts as a delivery system for the information and impulses.

Information transmitted through the central nervous system tells our bodies how to react in a certain situation, such as when we want to take a step the brain tells our knee joint to bend, or when we touch something hot we receive information giving us a burning sensation. The CNS also sends information about infection so that the appropriate organ e.g. the spleen can fight certain types of bacteria. It is a common misconception that the brain is the largest organ in the human body, when in fact it comes in at third largest after the skin and the liver respectively.

The central nervous system also controls our second system of the day, the cardiovascular system (also known as the circulatory system) which delivers blood and oxygen to the various parts of the body. The relationship between these two systems is quite complicated as each has an effect on the other. If we take the heart for example which is a key organ in the cardiovascular system, we can think that it feeds the brain and as such the CNS with oxygen and blood, but at the same time it is the brain that controls the heart telling it how often to beat.

In fact the cardiovascular system is not only responsible for delivering blood and oxygen, but also for transporting nutrients, hormones and waste throughout the body. All of these are carried in the blood, of which an average adult has about 5 liters. The heart acts as a pump which circulates the blood through the capillaries, arteries and veins. It is interesting to note that if these were laid end-to-end, the estimated length would be 100,000 KM.

Our next system, the digestive system is closely linked to the cardiovascular system as on the one hand it requires about 30% of all cardiac output. And on the other, the digestive system separates nutrients from food before they can be distributed via the cardiovascular system. Thus, as with the relationship between the CNS and the cardiovascular system, each system needs the other to work.

When thinking about the digestive system, the first organ that comes to mind is usually the stomach but surprisingly, this is not the largest organ in this system. That is, in fact the liver which is actually the largest solid organ in the body. The liver performs several functions among which are cleaning the blood, producing digestive liquids (bile) and storing energy. Again, we can see examples of cross system relationships here.

As well as the liver and stomach, the digestive system is made up of the pancreas and the intestine. The pancreas, like the liver, aids in digestion of food. After food has passed through the stomach and has been 'ground' into tiny pieces, it enters the intestine where the bile is added and the nutrients are extracted from the food. Waste products then move further down the intestine. Now, don't forget to join me next week when we will examine the tonsils and other glands.

II. Match the body parts with their definitions.

1. artery	a) a pair of organs in which oxygen from the air that is inhaled is
2. bile	transferred into the blood
3. blood	b) a bitter fluid that helps with digestion
4. brain	c) the fluid that carries oxygen and other elements to the tissues and
5. gland	carbon dioxide away from the tissues through the heart and vascular
6. heart	system
7. intestine	d) a blood vessel that carries blood away from the heart
8. joint	e) an organ or group of cells that releases substances or waste from the
9. liver	body
10. lungs	f) the mass of nerve tissue located in the head of animals with spinal
	cords; it is the center of thought and controls movement
	g) the portion of the alimentary canal extending from the stomach to the
	anus
	h) the organ that controls the flow of blood in the body
	i) a movable or fixed place or part where two bones or elements of a
	skeleton join
	j) an organ in the body that secretes bile to help digest carbohydrates, fats
	and proteins

III. Choose the correct answer.

'CNS' or 'central nervous system'

- a) an organ or group of cells that releases substances or waste from the body
- b) an organ in the body that secretes bile to help digest carbohydrates, fats and proteins.
- c) the part of the nervous system comprising of the brain and the spinal cord

'intestine'

- a) of the nervous system comprising of the brain and the spinal cord
- b) the portion of the alimentary canal extending from the stomach to the anus
- c) the part a pair of organs in which oxygen from the air that is inhaled is transferred into the blood

'digestive system'

- a) a blood vessel that carries blood away from the heart
- b) either of a pair of oval masses of lymphoid tissue, one on each side of the throat at the back of the mouth
- c) the part of the body that stores and processes food

'cardiovascular system'

- a) the fluid that carries oxygen and other elements to the tissues and carbon dioxide away from the tissues through the heart and vascular system
- b) the system of organs and tissues involved in circulating blood and lymph through the body
- c) the portion of the alimentary canal extending from the stomach to the anus 'spleen'
 - a) an organ near the stomach that has various roles in purifying and storing the blood
 - b) an organ or group of cells that releases substances or waste from the body
 - c) the mass of nerve tissue located in the head of animals with spinal cords; it is the center of thought and controls movement

Unit 3. Sterile Procedures

Active vocabulary

Infection

Wound рана

destruction of tissue руйнування тканини

antibiotic антибіотик antiseptic антисептичний

асептичний, стерильний aseptic contaminated заражений, забруднений

malaise нездужання morbidity захворюваність

pathogen патогенний мікроорганізм

phagocyte фагоцит septic септичний septicemia септицемія sterile стерильний infectious agent збудник інфекції

bacterium (pl.bacteria) бактерія virus вірус fungus (pl.fungi) грибок

injury травма, поранення

to penetrate проникати

гній pus

to multiply розмножуватися adjacent tissue прилегла тканина

asepsis асептика

to maintain sterility підтримувати стерильність

operating room операційна зала delivery room пологова зала insertion вставляння

sterile equipment стерильне обладнання sterile gown стерильний халат

gloves рукавички

surgery хірургічне втручання

I. Read and translate the text.

Surgical Asepsis and the Principles of Sterile Technique

Asepsis refers to the absence of infectious material or infection. Surgical asepsis is the absence of all microorganisms within any type of invasive procedure. Sterile technique is a set of specific practices and procedures performed to make equipment and areas free from all microorganisms and to maintain that sterility. Principles of sterile technique help to control and prevent infection, prevent the transmission of all microorganisms in a given area, and include all techniques that are practiced to maintain sterility.

Sterile technique is most commonly practiced in operating rooms, labour and delivery rooms, and special procedures or diagnostic areas. It is also used when performing a sterile procedure at the bedside, such as inserting devices into sterile areas of the body or cavities. In health care, sterile

technique is always used when the integrity of the skin is accessed, impaired, or broken (e.g., burns or surgical incisions). Sterile technique may include the use of sterile equipment, sterile gowns, and gloves

Sterile technique is essential to help prevent **surgical site infections** (**SSI**), an unintended and oftentimes preventable complication arising from surgery. SSI is defined as an "infection that occurs after surgery in the area of surgery" Preventing and reducing SSI are the most important reasons for using sterile technique during invasive procedures and surgeries.

Principles of Surgical Asepsis

All personnel involved in an aseptic procedure are required to follow certain principles. These principles must be strictly applied when performing any aseptic procedures, when assisting with aseptic procedures, and when intervening when the principles of surgical asepsis are breached. It is the responsibility of all health care workers to speak up and protect all patients from infection.

Principles of Sterile Technique. Safety considerations:

- 1. Hand hygiene is a priority before any aseptic procedure.
- 2. When performing a procedure, ensure the patient understands how to prevent contamination of equipment and knows to refrain from sudden movements or touching, laughing, sneezing, or talking over the sterile field.
- 3. Choose appropriate PPE to decrease the transmission of microorganisms from patients to health care worker.
- 4. Review hospital procedures and requirements for sterile technique prior to initiating any invasive procedure.
- 5. Health care providers who are ill should avoid invasive procedures or, if they can't avoid them, should double mask.
- 6. All objects used in a sterile field must be sterile.
- 7. A sterile object becomes non-sterile when touched by a non-sterile object.
- 8. Sterile items that are below the waist level, or items held below waist level, are considered to be non-sterile.
- 9. Sterile fields must always be kept in sight to be considered sterile.
- 10. When opening sterile equipment and adding supplies to a sterile field, take care to avoid contamination.
- 11. Any puncture, moisture, or tear that passes through a sterile barrier must be considered contaminated. Keep sterile surface dry and replace if wet or torn.
- 12. Once a sterile field is set up, the border of one inch at the edge of the sterile drape is considered non-sterile.
- 13. If there is any doubt about the sterility of an object, it is considered non-sterile
- 14. Sterile persons or sterile objects may only contact sterile areas; non-sterile persons or items contact only non-sterile areas.
- 15. Movement around and in the sterile field must not compromise or contaminate the sterile field.
- 16. Do not sneeze, cough, laugh, or talk over the sterile field.
- 17. Keep operating room (OR) traffic to a minimum, and keep doors closed.
- 18. Keep hair tied back.

II. Choose the correct answer.

1 Visitors have / must / has wash their hands before entering the ward. 2 Cleaners has / have / don't have to wash the floors four times a day. 3 Need I to / Do I need to / I need use a sterile swab. 4 You don't have to / You mustn't / You needn't touch patients with dirty hands. 5 You have to / must / need clean the door handles? 6 You must / mustn't / have to use this medication with this patient. 7 The rubbish needs to collect / collect / collecting. 8 The doctor need / needs / must to see this patient as quickly as possible.

III. Complete the following sentences choosing suitable words from the box.

1 The	common colo	d is not caused	d by	2 VRSA m	eans Vancor	nycin	3
can spr	ead by hand.	. 4	agents kill	micro-organis	sms. 5 A viru	is is a type of	6 A
	hous	e is actually to	oo clean. 7	The young and	l old are	to illne	ess.
8 The_	1	needs disinfec	ting.				
bin	resistant	bacteria	spotless	susceptible	infection	pathogen	antimicrobial

Unit 4. Instruments

Active vocabulary

bedpan підкладне судно

cannulaканюляcatheterкатетерdialyserдіалізатор

electrocardiograph machine електрокардіограф

endoscopeендоскопgauze spongeмарлева губкиsurgical scissorsхірургічні ножиці

hypodermic needle / syringe гіподермічна голка / шприц

infection control equipment обладнання для боротьби з інфекціями

bonnet чепчик для волосся

shoe cover бахіла

face shield захисний щиток для обличчя

gogglesзахисні окуляриsurgical maskхірургічна маскаinstrument sterilizerстерилізаторmeasuring tapeмірна стрічка

nasogastric tube назогастральна трубка

nebulizer небулайзер oxygen mask киснева маска

pipette or dropper піпетка

reflex hammer рефлекторний молоток sphygmomanometer сфігмоманометр

suction device всмоктувальний пристрій

thermometer термометр

tongue depressor депресор язика transfusion kit трансфузійний набір

ventilatorШВЛforcepsщипціbandageбинтenema bulbклізма

syringe and needle шприц із голкою

crutches милиці

MRI (magnetic resonance imaging) MPT (магнітно-резонансна томографія)

scalpel скальпель

sling пращоподібна пов'язка

splint шина stretcher носилки

wheelchair інвалідний візок

X-ray рентген tourniquet джгут scissors ножиці

surgical tweezers хірургічний пінцет, щипці dressing перев'язний матеріал

plaster пластир

blood pressure monitor вимірювач артеріального тиску

test tube пробірка

I. Read and translate the text.

Medical instruments

During your physical exam your doctor makes use of several different doctor's tools such as a blood pressure monitor which is designed to measure your blood pressure; an ophthalmoscope which is used to examine the eyes; a thermometer which the doctor will use to measure your temperature; a stethoscope which a doctor uses to listen to the patient's heart, lungs and abdomen, and an otoscope which your doctor will use to examine the inside of your ears, nose and mouth.

In addition to these, there are many more doctor's tools that are used in different specialized areas of medicine, to diagnose and observe and monitor a variety of more complicated medical conditions.

Stethoscope

This doctor's tool is a major symbol of the medical profession. Its beginnings can be traced all the way back to Laennec, the French doctor, who was the inventor of a crude model in 1819. Many modifications have occurred since then. The original version consisted of a wooden box in which the doctor heard the sounds within the patient's chest cavity.

The modern version is composed of two earpieces that are connected by a piece of flexible tubing to a diaphragm. A doctor makes use of this tool when he wants to hear the low-volume sounds that are put out by the heart, intestine and the fetal heartbeat.

Otoscope

An otoscope is another commonly used tool in health exams. It has a cone-shaped attachment on the end called an ear speculum. It is used to examine a patient's ear canal. The doctor is able to peer into the ear canal in order to check whether the eardrum is red or has fluid behind it; this is indicative of an ear infection. A pneumatic otoscope delivers a small puff of air to a patient's eardrum to see if it vibrates. This vibration of the eardrum is completely normal. An otoscope examination can also detect a wax build-up in the ear canal or whether the eardrum is punctured or ruptured.

Blood Pressure Monitor

Measuring blood pressure calls for an instrument named sphygmomanometer which measures the blood pressure in the arteries. There are basically two types of these instruments. One kind is a mercury column and the other consists of a gauge accompanied with a dial face. The

sphygmomanometer which is most commonly used today is the gauge which is attached to a rubber cuff. It is then wrapped around the patient's upper arm and is inflated in order to constrict the arteries. When the cuff is fully inflated with air, the doctor places a stethoscope over the brachial artery in the crook of the patient's arm. As the air in the cuff is slowly released, the first sound the doctor hears through the stethoscope is the systolic pressure. As the air continues to be released from the cuff, another point is reached when the doctor no longer hears any sound. This marks the diastolic blood pressure.

Thermometer

A thermometer is one of the most commonly used tools by doctors. It is a doctor's tool that measures the body temperature. They come in the following types:

Oral and rectal thermometers: A conventional oral or rectal thermometer consists of a sealed glass tube containing a liquid like mercury. Imprinted on the tube is a temperature scale. When the temperature rises or falls, the mercury will expand or contract, causing the mercury to move up or down the thermometer's tiny passageway. If the mercury moves up the scale, before it is used again, the thermometer will have to be "shaken down." In order to get an accurate reading, the patient must keep this instrument in contact with her body for approximately four minutes in order to obtain an accurate reading. The rectal thermometer is typically a little more accurate than an oral thermometer.

Digital thermometers: Today thermometers are available that have digital displays. It is much easier to read the temperature this way. A beeper signals when the thermometer has finished registering the temperature. These thermometers come with flexible tubes that resist breakage.

Ear thermometers: Eardrum thermometers are very precise and read infrared radiation that emanates from the eardrum tissue.

Basal thermometers: These thermometers measure minor changes in temperature in a woman's body to indicate to her whether ovulation, or when an egg has been released from a woman's ovary, has taken place. A woman's temperature may rise slightly when ovulation occurs and will not return to a normal temperature until the beginning ogf menstruation. Basal thermometers are quite sensitive and will monitor even the slightest temperature change.

II. Match the instruments with their definitions.

1.bandage	a)sticks which fit under your arms and are used to walk when your leg or foot
2.catheter	is injured or broken
3.crutches	b)a medical imaging technique used to produce images of internal organs
4.forceps	c)a tool which is used for listening to someone's breathing or heart
5.incubator	d)a long piece of cloth which is wrapped around an injured body part
6.MRI (magnetic	e)a metal, plastic or wooden element placed next to a broken bone to
resonance	immobilize it while it's healing
imaging)	f)an instrument with two long narrow parts for holding things during medical
7.scalpel	operations
8.splint	g)a piece of hospital equipment in which ill or premature babies lie to be kept
9.stethoscope	warm and given treatment
10.syringe	h)a small sharp knife used by doctors during operations to cut skin & tissue
	i)a tool which is used to inject fluid into the body or withdraw fluid from it
	j)a thin tube inserted into a patient's body in order to remove a liquid, e.g. urine

II. Answer the questions.

Which instruments are used

- 1. for taking out stitches?
- 2. for giving injections?
- 3. for exploring a wound?
- 4. for carrying an injured or ill person?
- 5. for measuring temperature of the body?
- 6. during examinations of the throat?
- 7. for stopping bleeding 8. for handling sterile instruments?

III. Read, translate and play out the dialogs.

Dialogue 1

- A: The doctor sent me over here to have my blood drawn.
- B: Certainly, please have a seat and roll up your left sleeve.
- A: What is this test for?
- B: Well, today your doctor wants us to check your white blood cell count.
- A: What does that tell him?
- B: Well, if it is elevated, you might have an infection.
- A: Will the blood test hurt?
- B: It is only a little pin stick. I am going to put a tourniquet on your arm to puff your veins up.
- A: Ouch!
- B: There we go! I got the blood that I needed.

Dialogue 2

- **A:** I was told to come to you to get a chest X-ray.
- **B:** No problem. Just take your clothes off from the waist up and put the gown on, with the opening in the back.
- **A:** Then what should I do?
- **B:** You will stand over here up against this plate.
- **A:** Should I just stand naturally?
- **B:** You will raise your arms up shoulder high.
- **A:** Is this all right?
- **B:** Yes, you are doing great.
- **A:** Where will you be going?
- **B:** I need to stand behind this shield. Now you will take a deep breath, hold it, and let it out.
- **A:** Is that it?
- **B:** That's it. You can get dressed when the film is developed.

Unit 5. Disinfectants and Antiseptics

Active vocabulary

disinfectant дезінфекційний засіб toxic отруйний, токсичний chemical substance хімічна речовина to destroy руйнувати, знищувати

microorganism мікроорганізм

tissue тканина

to inhibit затримувати, гальмувати

growth ріст, розвиток to sterilize стерилізувати to cleanse чистити, очищати to maintain підтримувати, зберігати

sterility стерильність

boiled варений, кип'ячений autoclaved стерилізований в автоклаві

precise точний, певний destructive руйнівний, згубний роwer сила, потужність, енергія

strength міцність, сила length довжина

to refer to sth. належати до чогось

are referred to as називаються

bactericide бактерицидна речовина

to kill bacteria вбивати бактерії bacteriostatics бактеріостатики to prevent запобігати to grow (grew, grown) рости

to multiply розмножуватися

to swab wounds промивати рани тампоном gential violet генціановий фіолетовий рhenol фенол, карболова кислота

linen sanitary equipment постільна білизна

chemical agent хімічна речовина, реактив inanimate неживий, без ознак життя

hydrogen peroxide перекис водню

to irrigate промивати (рану тощо)

сavity порожнина

ехстеtа виділення, екскременти

tincture of iodine настоянка йоду

pus гній

I. Read and translate the text, answer the questions.

Disinfectants and Antiseptics

Disinfectants are toxic chemical substances which destroy microorganisms and living tissue. Antiseptics are less toxic substances which inhibit the growth of microorganisms. Generally speaking, disinfectants are used for sterilizing inanimate objects, and antiseptics are used for cleansing the skin

and maintaining the sterility of boiled or autoclaved instruments. These definitions are, however, not precise because the destructive power of a disinfectant depends on its strength and the length of time for which it is used. Nowadays, disinfectants are often referred to as "bactericides" because they kill bacteria, and antiseptics are called "bacteriostatics" because they prevent bacteria from growing and multiplying.

Some chemical agents commonly used as disinfectants and antiseptics Substabce Use **Proflavine** For disinfecting the skin and swabbing wounds For preparing the skin before operation Gentian violet Tincture of iodine For disinfecting the skin For disinfecting the skin, intruments and other Centrimide equipment Hydrogen peroxide For irrigating wounds and cavities and removing pus and blood For disinfecting the skin and intruments Hibitane Lyxol For disinfecting floors, baths, clothes, etc. Phenol For disinfecting linen, sanitary equipment and excreta 1. What do disinfectants do? 2. What do antiseptics do? 3. What are disinfectants used for? 4. What are antiseptics used for? 5. What does a destructive power of a disinfectant depend on? 6. Why are disinfectants sometimes called bactericides? 7. Why are antiseptics sometimes called bacteriostatics? II. Fill in the gaps. 1. Lysol is a poisonous substance or lysol issubstance. 2. Microorganisms are killed by disinfectants or microorganisms are by disinfectants. 3. Antiseptics prevent bacteria from growing and multiplying or Antiseptics the growth of bacteria. 4. We can talk about objects that are not alive or..... 5. We can say hydrogen peroxide is used for washing out wounds and cavities or hydrogen peroxide is used for wounds and cavities. 6. We can talk about preserving the sterility of equipment or sterility of equipment. 7. We can say instruments are sterilized by steam under pressure or instruments are sterilized by..... 8. One word for urine, feces and sputum is 9. We can talk about antiseptics or...... and disinfectants or 10. Instead of saying an exact definition, we can say, a definition. 11. We can talk about cleaning the skin orthe skin.

12. We can talk about a chemical agent or a chemical

Unit 6. At the reception ward

Active vocabulary

reception ward приймальне відділення

death Смерть department Відділення

dose Доза

dosage Дозування hospitalize Госпіталізувати

indicate вказувати, позначати initial початковий, первісний intramuscular внутрішньом'язовий внутрішньовенний keep (kept, kept) тримати, зберігати

prescribe прописувати, призначати poisonous отруйний, токсичний

prevent Попереджувати

result from відбуватися внаслідок reception ward приймальне відділення

recovery Одужання

round обхід (хворих лікарем) relieve полегшувати, знімати (біль)

I. Read and translate the text.

At the reception ward

Hospital is a special medical institution that is aimed at treatment and prevention of various diseases and protection of people's health.

When patients are admitted to the hospital first of all they are received by a nurse on duty at the reception ward.

Those patients who are to be hospitalized have already received the direction from the polyclinic. The nurse on duty fills in patients' case histories in which she writes down their names, age, place of work, occupation, address and the initial diagnosis made by a doctor at the polyclinic.

Then a doctor on duty examines the hospitalized patients and gives his instructions what department and wards the patients are to be admitted to.

At the in-patient departments of a hospital life begins early in the morning. The nurse on duty takes the patients' temperature, gives them intramuscular and intravenous injections or sets a dropper if administered before, takes stomach juice for analysis. Besides, she leads the patients to different procedures such as gastroscopy or ultrasound of the abdominal cavity organs that are usually carried out on an empty stomach. The nurse also gives all the prescribed remedies in the doses indicated by the ward doctors.

The nurses keep all the drugs in special drug cabinets. All the drugs have special labels. The names of drugs are indicated on them. Patients are not allowed to take the medicines themselves because some drugs are poisonous, the overdosage of some other drugs may cause unfavorable reactions and even death.

At about nine o'clock in the morning the doctors begin the daily rounds of the wards during which they examine all the patients. After the medical examination the doctors administer the patients different procedures: electrocardiograms are taken, laboratory analyses of blood, urine and gastric juice are made, gastroscopy and ultrasound are carried out. Some patients are administered a bed regimen, others are allowed to walk; some are to follow a diet to relieve stomachache or prevent unfavorable results in case of stomach troubles. All the doctors always treat the patients with great attention and care. There is no doubt that such a hearty attitude of the doctors to the patients helps much in their recovery.

II. Answer the questions.

- 1. Who and where are the patients received by when admitted to the hospital?
- 2. What do patients receive from the polyclinic when it's necessary to hospitalize them?
- 3. What is usually written in a patient's case history?
- 4. What does a doctor decide concerning the patient?
- 5. What are the duties of a nurse?
- 6. Where are the drugs usually kept at hospital?
- 7. Why aren't patients allowed to take the medicines themselves?
- 8 What procedures can be administered to a patient?

III. Match the following terms with their definitions.

a) the graphic record of the heart work and its possible disorders;							
b) the intramuscular or intravenous procedure when the skin is punctured;							
=				the help of r	nedicines;		
, ,	-	-					
e) the usual	every-morni	ng activity o	f a doctor on	duty;			
f) external examination of the human body with the help of special sounds;							
g) the procedure when a patient passes his blood or urine for a detailed							
h) an unpleasant procedure which is carried out on an empty stomach so as							
to reveal its disorders.							
2	1	<u> </u>	6	7	0		
3.	4.	5.	0.	7.	8.		
	b) the intrant c) the proceed the usual of external end of the proceed the pro	b) the intramuscular or in c) the procedure of making d) the general checkup on e) the usual every-morning of the procedure when a laboratory study; h) an unpleasant procedure to reveal its disorders.	b) the intramuscular or intravenous p c) the procedure of making a patient d) the general checkup of a patient by e) the usual every-morning activity of f) external examination of the human g) the procedure when a patient pas laboratory study; h) an unpleasant procedure which is to reveal its disorders.	b) the intramuscular or intravenous procedure when c) the procedure of making a patient recover with d) the general checkup of a patient by a doctor; e) the usual every-morning activity of a doctor on f) external examination of the human body with the g) the procedure when a patient passes his blocklaboratory study; h) an unpleasant procedure which is carried out of to reveal its disorders.	b) the intramuscular or intravenous procedure when the skin is c) the procedure of making a patient recover with the help of r d) the general checkup of a patient by a doctor; e) the usual every-morning activity of a doctor on duty; f) external examination of the human body with the help of sp g) the procedure when a patient passes his blood or urine f laboratory study; h) an unpleasant procedure which is carried out on an empty s to reveal its disorders.		

IV. Translate the following expressions into English.

Потрапити до лікарні, ставити крапельницю, оглядати госпіталізованих хворих, в стаціонарі, амбулаторне відділення, отримати направлення з поліклініки, заповнювати історії хвороби, натщесерце, брати шлунковий сік на аналіз, палатний лікар, ультразвукове дослідження органів черевної порожнини, приймати прописані ліки, спеціалізовані шафи для ліків, викликати несприятливі реакції, назначати різні процедури, знімати біль у шлунку, щире ставлення до хворих.

V.Put the following verbs into the correct form.

- 1. She (to go) to the library after classes.
- 2. They (to study) heart diseases last Friday.
- 3. The body (to consist) of organs and systems.
- 4. Histology (to deal) with the study of tissues.
- 5. The patient's sleep (to affect) by nightmare last week.
- 6. The 1st-year students always (to learn) a lot of Latin terms.
- 7. The nurses (to take) good care of him after the last operation.
- 8. If my district doctor (to be) in the morning, he (to come) to visit me.

VI. Build the sentences.

- 1. to / dangerous / Is / life / disease / this?
- 2. the / What / drug / of / the / effect / was?
- 3. of / Mr. / did / What / complain / White?
- 4. the / attack / system / will / What / infection?
- 5. remember / doctor's / your / district / you / Do / name?
- 6. the / helps / out / administrations / Who / doctor / carry / to / his?
- 7. they / keep / The / in / nurses / cabinets / drugs / do / special / not?
- 8. at / of / begin / a.m. / the / daily / doctor / 8 / wards / his / rounds /Does / 9?

VII.Translate into English.

- 1. Деякі процедури проводять натщесерце.
- 2. Де медичні сестри зберігають ліки в лікарні?
- 3. Мені будуть ставити крапельниці протягом наступного тижня.
- 4. Погані звички у харчуванні можуть спричиняти біль у шлунку.
- 5. О котрій годині черговий лікар починає щоденний обхід хворих?
- 6. Гарне ставлення лікаря до хворого сприяє його швидкому одужанню.
- 7. Чи медична сестра записала ваші персональні дані в історію хвороби? Так, звичайно.
- 8. Йому необхідно зробити гастроскопію, щоб підтвердити діагноз виразки шлунку.

Unit 7: Nurse's daily routines

Active vocabulary

NurseМедсестраmale nurseМедбрат

health workers медичні працівники Caregiver доглядальник, опікун

Complaint Скарга

injured patient хворий, травмований пацієнт

Endorsement Затвердження licensure requirements ліцензійні вимоги

eeducational preparation Навчання

registered nurse (RN) дипломована медсестра/фельдшер licensed practical nurse (LPN) молодша медсестра/санітарка

supervised clinical practice клінічна практика

associate degree baccalaureate degree night shift

nursing home ambulatory care

community and migrant health centre

emergency medical centre

observing and recording patient behavior

retirement communities rehabilitation centre occupational health

certified nurse midwife (CNM)

nurse-midwifery maternal and fetal care

fetal period

maternity

patient assessment

obstetric care

obstetrician/gynecologist prenatal and postnatal care

to give injection to take blood pressure to gain basic skills to feel pulse

to work at the patient's bedside

to take temperature to make tests to apply first aid to relieve the pain

performing physical exams and diagnostic

collecting patient health histories counseling patients and their families educating patients about treatment plans administering medications, wound care, and

other treatment options

interpreting patient information and making decisions about necessary actions, where appropriate

consulting with nurse supervisors and physicians to determine best treatment plans for patients

directing and supervising the care of other heath care professionals, including licensed practical nurses, certified nurse assistants, and nurse aids

conducting research to improve patient outcomes and healthcare processes

диплом молодшого спеціаліста диплом/ступінь бакалавра

нічна зміна

дім пристарілих амбулаторна допомога

медичний центр для членів спільноти і

мігрантів

центр швидкої медичної допомоги відслідковування і запис стану пацієнта

заклади для пенсіонерів реабілітаційний центр

гігієна праці Акушерка Акушерство

материнський і допологовой догляд період внутрішньоутробного розвитку

плода

Материнство

оцінка стану пацієнта акушерство, гінекологія акушерська допомога акушер/гінеколог

допологовий і післяпологовий догляд

робити ін'єкцію вимірювати тиск

набувати основних навичок

пробувати пульс

працювати біля ліжка хворого вимірювати температуру

робити аналізи

надавати першу допомогу

полегшити біль

проведення огляду і діагностика складання історій хвороби пацієнтів консультування пацієнтів та їхніх сімей пояснення пацієнтам планів лікування керування прийомом ліків, доглядом за ранами та іншими видами лікування інтерпретація інформації щодо пацієнта та прийняття рішень про необхідні дії, де це

консультування зі старшими медсестрами і терапевтами, щоб призначити найкращі плани лікування пацієнтам

керівництво і нагляд за лікуванням інших медичних працівників, включаючи санітарок і молодших медсестер

проведення досліджень для поліпшення результатів пацієнта та його здоров'я загалом

I. Read and translate the text.

Nurse's daily routines

Nurses constitute the largest group of health care professionals. The nursing profession developed around hospitals after World War I, and it primarily attracted women. Before World War I, more than 70 percent of nurses worked in private duty, either in patients' homes or for private pay patients in hospitals.

Nurses are the major caregivers of sick and injured patients, addressing their physical, mental and emotional needs. All states require nurses to be licensed to practice. Nurses can be licensed in more than one state through examination or endorsement of a license issued by another state. The licensure requirements include graduation form an approved nursing program and successful completion of a national examination. Educational preparation distinguishes between two levels of nurses. Registered nurses (RNs) must complete an associate's degree (ADN), a diploma program, or baccalaureate degree (BSN). ADN programs take about two or three years and are offered by community and junior colleges. Diploma programs take two to three years and are offered by hospitals. BSN programs take four to five years and are offered by colleges and universities. Licensed practical nurses (LPNs) – called licensed vocational nurses (LVNs) in some states – must complete a state-approved program in practical nursing and a national written examination. Most practical nursing programs last about one year and include classroom study as well as supervised clinical practice.

Nurse's work in variety of settings, including hospitals, nursing homes, private practice, ambulatory care centres, community and migrant health centres, emergency medical centres, work sites, government and private agencies, clinics, schools, retirement communities, rehabilitation centres and private-duty nurses in patients' homes. Nurses are often classified according to the settings in which they work: hospital nurses, long-term care nurses, public health nurses, private-duty nurses, office nurses and occupational health or industrial nurses. Head nurses act as supervisors of other nurses. RNs supervise LPNs.

Certified nurse midwives (CNMs) are RNs with additional training from a nurse-midwifery program in areas such as maternal and fetal care, maternity and child nursing and patient assessment. CNMs deliver babies, provide family planning education, manage gynecological and obstetric care and can be used as substitutes for obstetricians/gynecologists in prenatal and postnatal care. They refer abnormal or high-risk patients to obstetricians or jointly manage the care of such patients.

What can you expect from a registered nurse job? Registered nurse's work with a variety of patients, from the ill and injured to people who are healthy and hoping to stay that way. Many nurses specialize and work only with particular types of patients, such as newborn babies, or patients with particular medical conditions, such as cancer.

You're probably wondering "What does a registered nurse do?" As registered nurse, you will be the person most patients deal with on a daily basis. It's your job to administer medical care, answer patient questions, and communicate any concerns to your nurse service. Specific responsibilities associated with your role can vary, depending on your specialty and work environment, but they may include the following: observing and recording patient behavior; performing physical exams and diagnostic; collecting patient health histories; counseling patients and their families; educating patients about treatment plans; administering medications, wound care, and other treatment options; interpreting patient information and making decisions about necessary actions, where appropriate; consulting with nurse supervisors and physicians to determine best treatment plans for patients; directing and supervising the care of other heath care professionals, including licensed practical nurses, certified nurse assistants, and nurse aids; conducting research to improve patient outcomes and healthcare processes. Registered nurses working in hospitals and surgeries typically work in rotating shifts to ensure patients receive 24-hour care. Night shifts, weekend work, and public holiday shifts are all common.

II. Answer the questions.

1. What are the requirements for all nurses in all states? Is there any difference between RNs, LPNs and CNMs? Where can the nurses work and what educational background should they have for that? What does a registered nurse do on a daily basis?

III. Match nurse's daily responsibilities with their Ukrainian translation.

III. Match nurse's daily responsibilities with	their Ukrainian translation.
1. collecting patient health histories	а. керівництво і нагляд за лікуванням інших
	медичних працівників, включаючи
	санітарок і молодших медсестер
2. performing physical exams and diagnostic	b. пояснення пацієнтам планів лікування
3. educating patients about treatment plans	с. консультування зі старшими
	медсестрами і терапевтами, щоб
	призначити найкращі плани лікування
A shaaming and magading noticet helpsylon	пацієнтам
4. observing and recording patient behavior	d. робити ін'єкцію
5. to give injection	е. відслідковування і запис стану пацієнта
6. to take blood pressure	f. набувати основних навичок
7. to gain basic skills	д. пробувати пульс
8. to feel pulse	h. вимірювати тиск
9.administering medications, wound care, and other treatment options	і. інтерпретація інформації щодо пацієнта та прийняття рішень про необхідні дії, де це
other treatment options	па прииняття рішень про неоохідні дії, де це можливо
10.interpreting patient information and making	ј. керування прийомом ліків, доглядом за
decisions about necessary actions, where	ранами та іншими видами лікування
appropriate	ранали та пиштин видали зикувания
11.consulting with nurse supervisors and	к. проведення огляду і діагностика
physicians to determine best treatment plans	
for patients	
12.directing and supervising the care of other	1. складання історій хвороби пацієнтів
heath care professionals, including licensed	
practical nurses, certified nurse assistants, and	
nurse aids	
13.conducting research to improve patient	т .надавати першу допомогу
outcomes and healthcare processes.	
14. to relieve the pain	п. вимірювати температуру
15. to take temperature	о. робити аналізи
16. to make tests	р. проведення досліджень для поліпшення
	результатів пацієнта та його здоров'я
	загалом
17. to apply first aid	r. полегшити біль

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

IV. Match the parts of expressions.

1 v . Match the parts of express	10113.
1.collecting	a. blood pressure
2. performing	b. basic skills
3. to give	c. pulse
4. to take	d. patients about treatment plans
5. to gain	e. patient health histories

6. to fe	eel				f. pati	f. patient behavior				
7. edu	cating				g. inje	g. injection				
8. observing and recording						h. physical exams and diagnostic				
9. to relieve						i. first aid				
10. to	10. to apply					j. the pain				
1. 2. 3. 4. 5. 6. 7. 8. 9.						10.				

V.	Fill	in	the	gaps.
----	------	----	-----	-------

1.	Nurses constitute the largest group of
2.	Nurses are the major of sick and injured patients, addressing their physical,
	mental and emotional needs.
3.	All states require nurses to beed to practice.
4.	Registered nurses (RNs) must complete an's degree, a diploma program,
	orte degree.
5.	Licensed practical nurses (LPNs) must complete a state-approved program in
	ng and a national written examination.
6.	Most practical nursing programs last about one year and include classroom study as well
	as supervisedce.
7.	Certified nurse midwives (CNMs) are RNs with additional training from a
	ry program in areas such asal and
	al care, maternity and child nursing and patient assessment.
8.	CNMs deliver babies, provide family planning education, manage
	ic care and can be used as
	substitutes for obstetricians/gynaecologists in prenatal and postnatal care.
9.	CNMs refer abnormal or high-risk patients tons or jointly manage the
	care of such patients.
10.	Registered nurse's work with a variety of patients, from the ill anded
	to people who are healthy and hoping to stay that way.

VI. Translate into English.

- 1. Медсестри складають найбільшу групу медичних працівників.
- 2. Медсестри це основні доглядальники хворих, які полегшують фізичні, психічні та емоційні стани своїх пацієнтів.
- 3. Дипломована медсестра повинна здобути диплом молодшого спеціаліста або бакалавра.
- 4. Молодші медсестри повинні пройти затверджену державою програму практичної сестринської справи та скласти національний письмовий іспит.
- 5. Працюючи дипломованою медсестрою, ви будете особою, з якою більшість пацієнтів мають справу щодня.
- 6. Акушерки це дипломовані медсестри з додатковою підготовкою в таких сферах, як догляд за матір'ю та плодом, сестринство матері та дитини і оцінка стану папієнта.
- 7. Вашою роботою буде керування медичним наглядом за пацієнтами, відповіді на їх запитання та звітування про будь-які проблеми у ваше сестринське відділення.
- 8. Дипломовані медсестри у лікарнях та хірургії зазвичай працюють позмінно, щоб забезпечити пацієнтам цілодобову допомогу.
- 9. Нічні зміни, робота на вихідні та свята ϵ дуже поширеними.

Unit 8. Examination of the patient

Active vocabulary

breathlessness задуха cough кашель

dizziness запаморочення

edema набряк
estimate оцінювати
fissure тріщина
fracture перелом
hemorrhage кровотеча
headache головний біль

height pict

mental розумовий, психічний

murmur шум

palpation пальпація (прощупування)

pathogenesis патогенез (шлях та механізм розвитку хвороби)

percussion перкусія (простукування)

rales, pl. хрипи
reveal виявляти
swelling припухлість

I. Read and translate the text.

Examination of the patient

Before treating the patient it is necessary to make a correct diagnosis of the disease and to determine its etiology, i.e. the causes of the disease. The examining doctor must know well the pathogenesis of any disease, i.e. the way and mechanism of its development, as well as the symptoms revealing it.

A number of different procedures is used to establish a diagnosis: history-taking; physical examination, which includes visual examination, palpation, percussion, auscultation; laboratory studies, consisting of urinalysis, blood, sputum and other analyses; instrumental studies, for example, taking electrocardiograms or cystoscopy, X-ray examination and others.

For determining a disease it is very important to know its symptoms, i.e. the signs of a disease. They are breathlessness, edema, cough, chill, vomiting, fever, hemorrhage, headache, rash, swelling and others. Some of these symptoms are objective, for example, hemorrhage or vomiting, because they are determined by objective study, while others, such as headache or dizziness are subjective, since they are evident only to the patient.

Physical examination is the first objective stage in examination of a patient. It must be carried on in a large and warm consulting room with day light. The light is very important: it allows to estimate the color of the patient's skin, conjunctiva, oral cavity.

The scheme of the physical examination includes three stages:

- general examination;
- local examination;
- examination of body systems.

On general examination the patient is properly examined from head to toes: this helps the doctor to estimate the physical and mental state of his patient. The examiner also determines the patient's weight and height, observes his facial expression, movements, speech, state of lymphatic nodes, muscles, bones, joints.

On local examination the doctor examines the patient's head, eyes, nose, ears, oral cavity, neck, thyroid gland, etc. to estimate the functional state of particular parts of the body.

Examination of body systems includes the study of the respiratory, endocrine, nervous and other systems. On this stage the doctor applies the technique of palpation and percussion to determine whether the borders of internal organs are normal or abnormal. By means of auscultation the examiner can reveal rales in the lungs in case of pneumonia or bronchitis, or heart murmurs if a patient suffers from cardio-vascular diseases.

Laboratory analyses are important as well. Blood analysis revealing leukocytosis immediately indicates the presence of inflammation in the body. Urinalyses help to reveal the presence of urinary tract infections such as cystitis, nephritis or pyelonephritis. Analysis of sputum is performed to confirm the diagnosis of tuberculosis.

Instrumental procedures also help to determine health problems. Electrocardiograms are necessary to monitor the heart work. X-ray usually shows the borders and structure of the internal organs, fractures and fissures, accumulation of liquid in the lungs, etc.

So, examination of the patient is a complex procedure helping to timely reveal diseases or dysfunctions of any organs and start their treatment.

II. Answer the questions.

- 1. What is it necessary to know to make a correct diagnosis?
- 2. What kind of procedures are used to establish a diagnosis?
- 3. What groups can symptoms be divided into?
- 4. What is the difference between the objective and subjective symptoms?
- 5. What does the scheme of the physical examination include?
- 6. What is examined during each stage of physical examination?
- 7. Why are laboratory analyses important?
- 8. What does X-ray help to reveal?

III. Math the symptoms and their definitions.

1. hemorrhage	a) small red spots on the skin
2. cough	b) removal of the contents of the stomach
3. headache	c) feeling of coldness during high fever
4. rash	d) pain in the head
5. fever	e) profuse bleeding from injured blood vessels
6. vomiting	f) accumulation of fluid under the skin or in the body cavities
7. chill	g) high body temperature
8. eedema	h) reflex which helps to remove foreign substances and microbes from the
	airways

1.	2.	3.	4.	5.	6.	7.	8.

IV.Name the illness.

Model: inflammation of the lungs is pneumonia.

- 1. inflammation of the kidneys
- 2. inflammation of the lungs
- 3. inflammation of the urinary bladder
- 4. inflammation of bronchi
- 5. inflammation of the eye conjunctiva
- 6. pus accumulation around the kidneys
- 7. lesion in the stomach
- 8. infection caused by Mycobacteria

V. Translate expressions into English.

Комплексна процедура, поставити правильний діагноз (2 синоніми), причина захворювання, походження хвороби, збирання анамнезу, проводити аналіз сечі та мокротиння, задуха та припухлість, перший етап в огляді хворого, оглядати з голови до п'ят, оцінити фізичний та психічний стан хворого, дихальна та ендокринна системи, техніка прощупування та простукування, за допомогою прослуховування, виявити хрипи у легенях, спостерігати за роботою серця.

VI. Translate the words in italics into English.

- 1. Хрипи в легенях usually appear in case of пневмонії чи бронхіту.
- 2. Increased leukocytosis indicates наявність запалення в організмі.
- 3. If a patient suffers from серцево-судинних захворювань, he may have шуми у серці.
- 4. Аналіз сечі helps виявити the presence of urinary tract infections such as *цистит та нефрит*.
- 5. On general examination the doctor observes the patient's *вираз обличчя*, *рухи*, *мовлення*, *стан лімфатичних вузлів*, *м'язів*, *суглобів*.
- 6. The local examination includes the examination of the patient's голови, очей, вух, носу, ротової порожнини, шиї, щитовидної залози.
- 7. Огляд систем організму is carried out by means of прощупування, простукування, прослуховування.
- 8. Examination of the patient is a комплексна процедура that helps вчасно виявити diseases.

VII. Translate the following sentences into English.

- 1. Електрокардіограма показує роботу серця.
- 2. Перед лікуванням лікар має ретельно обстежити хворого.
- 3. Шлях та механізм розвитку хвороби називається патогенез.
- 4. Хірург, що оглядає цього хворого, ϵ найкращим в нашому місті.
- 5. Йому поставили діагноз бронхіту на основі результатів аналізу та аускультації.
- 6. Симптоми це ознаки хвороби, які допомагають встановити правильний діагноз.
- 7. Межі внутрішніх органів можна встановити за допомогою пальпації та перкусії.
- 8. Фізичний огляд хворого включає три етапи: загальний та місцевий огляд, а також огляд систем організму.

VIII. Examine your patient according to the plan.

1. Conditions.	
2. General stage.	
3. Local stage.	
4.Examination of body systems.	
5. Techniques applied.	

Unit 9. The First Aid

Active vocabulary

adhesive plasterлейкопластирampouleампулаantibiotics, pl.антибіотикиartificialштучний

antipyretics, pl. жарознижувальні засоби disposable syringe одноразовий шприц

emetics, pl. засоби, які викликають блювоту

епета клізма

first-aid kit медична аптечка injury пошкодження, травма

iodine йод

non-registered nurse молодша медична сестра

paramedic фельдшер severe серйозний suppository свіча

team бригада (швидкої допомоги)

tourniquet, джгут vial флакон

I. Read and translate the text.

The First Aid

Always keep in mind that in any emergency situation, you should keep your wits about you. Be aware of your surroundings, and ensure that you yourself are not in danger. Survey the scene, call for help and perform first aid depending on the situation.

Essentially, first aid is the initial assistance given to a victim of injury or illness, before he or she can be attended to by a professional team. Very often quick medical treatment carried out with a clear head and presence of mind can save the life of the patient, and therefore the importance of first aid cannot be understated.

First aid courses would normally cover basic life support scenarios such as resuscitation, choking, slings and bandaging, CPR, shock, bleeding, fractures, bites and stings, foreign bodies among others. The care given is usually temporary, till proper medical treatment by a qualified doctor can be availed of. Nurses should be calm and confident and establish a human connection with the victim as soon as possible. Patients may be in shock and will require a firm yet compassionate hand and emotional support. Nurses will need to gather any helpful medical information as soon as possible and note it down correctly so that the doctor can take over as

required. In case of disasters, there will be a profound psychological impact also which needs to be handled with care.

In just six minutes, the human brain can become incapacitated due to lack of oxygen. Nurses administering first aid should have enough knowledge and expertise to ensure that the right methods of administering medical assistance are provided. An inept nurse who is unable to quickly assess and respond to the emergency need will be of no help in such a situation. When the right care is given, the severity of the emergency can be curtailed.

Nurses at all levels in their career should keep themselves updated with the latest techniques and best practices in emergency care. Explore various first aid courses which should have topics ranging from primary assessment and accepted methodology in first aid for adults and children, right from basics through to the management of emergency disaster situations. Undertake a professional development course in First Aid, and help to save lives!

Since historic times, first aid has been an important component of medical care. Nurses are often the first to deal with patients who are in need of immediate care, and it is vital for them to be updated with knowledge of emergency care practices.

Why is first aid so important for nurses? Emergency care centres are more often than not buzzing with action; and in the event of any serious mishap or disaster they will need all the expertise and skilled hands they can find. In such situations, the first aid and emergency care measures administered by nurses can often mark the difference between life and death. Nurses who are experienced in first aid become an invaluable support not only to the patients, but the information they can provide proves to be critical to professional emergency responders and medical practitioners. Potential tragedies can be downscaled into something that is manageable.

Should be noted that there is emergency medical service (EMS). It is a special medical service that provides out-of-hospital medical care and transportation of patients with illnesses and injuries to hospitals. It is carried out by the specialized facility called the First Aid Station. It is on duty all day long. Calls are made to the First Aid Station in case of an accident or a sudden severe illness. There are a lot of ambulances at the First Aid Station. They all are well-equipped with first-aid kits. First-aid kit is a special case which contains all the necessary things for rendering the first aid and making a diagnosis: ampoules, boxes, vials with different drugs and tubes with liniment; alcohol, cotton wadding, disposable syringes for IV and IM injections; antiseptics, brilliant green, iodine, adhesive plasters to clean and close wounds; bandage and tourniquet to stop bleeding; inhalers for people suffering from respiratory diseases; enema, probe, hot water bottle for those who have troubles with the gastrointestinal tract; masks and gloves for the first-aid doctors for their personal protection. Among medicines, there are pain-killers, tonics, antibiotics, antiinflammatory remedies, emetics and anti-emetics, antipyretics, sedatives and hypnotics, laxatives and suppositories in the first-aid kit. It may contain even narcotic medicines to relieve pain in severe cases. The ambulances also carry artificial respiration apparatus, sets of splints and stretchers, thermometers to take the temperature, tonometers to measure blood pressure, portable electrocardiograph to monitor a patient's heart work.

There are several kinds of ambulance teams that are trained to deliver specialized medical aid: cardiac intensive care teams, psychiatric care teams, children's emergency, etc. Each ambulance is equipped with appropriate instruments according to their qualification.

All ambulances are radio equipped. To call in an ambulance it is necessary to dial up 103. The dispatcher is responsible for the "pre-arrival" instructions: he receives the call, asks for all the important details (for example, the address of an accident, types of injuries) and then directs the corresponding ambulance.

The ambulance team usually consists of an ambulance doctor, medical assistant (or paramedic), and non-registered nurse. The main thing in the work of the ambulance doctor is to make a correct diagnosis quickly. That's why the doctor must have deep knowledge of emergency surgery, toxicology, emergency therapy, obstetrics and gynecology. The paramedic helps the doctor and usually prepares the necessary instruments for a certain procedure. The duty of the non-

registered nurse is to keep the first-aid kit in order. There is also an ambulance driver who is trained to transport people carefully.

In Ukraine there are government-financed and private ambulance services. The main function of the latter is mainly to transport a patient to the hospital.

II. Answer the questions.

- 1. What is the first aid?
- 2. Why is first aid so important for nurses?
- 3. What is Emergency medical service?
- 4. What does the emergency medical service provide?
- 5. How many hours a day do the First Aid Stations work?
- 6. What are the ambulances equipped with?
- 7. What medical things does the first-aid kit contain?
- 8. What drugs are there in the first-aid kit?
- 9. What are the members of the ambulance team? What are their duties?
- 10. What types of ambulance services are in Ukraine?

III. Match the terms with their definition.

1.anti-inflammatory drugs	a) medicines that decrease fever;
2. antipyretics	b) medicines that are used to calm down and relax the patient;
3. analgesics	c) medicines for relieving constipation;
4. emetics	d) solid medicines that are inserted into the rectum where they melt
5. hypnotics	and affect the body;
6. laxatives	e) medicines that relieve pain, they are also called pain-killers;
7. sedatives	f) medicines that produce vomiting;
8. suppositories	g) medicines that help to reduce inflammation;
	h) medicines that produce sleep.

1.	2.	3.	4.	5.	6.	7.	8.

IV. Match the parts of expressions. Translate into Ukrainian.

• •	
1. out-of-hospital	a) nurse
2. disposable	b) remedies
3. non-registered	c) services
4. pre-arrival	d) kits
5. government-financed	e) syringes
6. anti-inflammatory	f) diseases
7. first-aid	g) medical care
8. respiratory	h) instructions

V. Right or wrong?

- 1. Masks and gloves in the first-aid kit are necessary for the doctor's personal protection.
- 2. The patient's blood pressure is measured with the help of the portable electrocardiograph.
- 3. To take the temperature, nurses use thermometers.
- 4. Bleeding can be easily stopped with brilliant green or iodine or some other antiseptic.

- 5. Stretchers are used when a person has broken his leg.
- 6. Gastrointestinal disorders can be relieved with the help of enema, probe, hot water bottle.
- 7. The ambulance doctor monitors the patient's heart work with portable artificial respiration apparatus.
- 8. A person suffering from asthma needs to use a set of splints.

VI. Translate the words in italics into English.

- 1. Out-of-hospital medical care is provided by *станцією швидкої допомоги*.
- 2. Each ambulance has медичні аптечки with антисептиками, знеболюючими, заспокійливими, жарознижувальними засобами, etc.
- 3. The First Aid Stations are *чергуванні* all day long, and they are always ready *надати першу* медичну допомогу.
- 4. There are several kinds of ambulance teams: *кардіо-реанімаційні, психіатричні дитячі*, so on.
- 5. It is the dispatcher who $\epsilon i \partial n o \epsilon i \partial a \epsilon$ 3a the "pre-arrival" instructions.
- 6. An ambulance doctor, фельдшер and молодша медична сестра are the members of an ambulance team.
- 7. The main thing in the work of the ambulance doctor is *поставити правильний діагноз* quickly.
- 8. In Ukraine there are державні та приватні ambulance services.

VII. Match the terms with their definitions.

1. anti-inflammatory drugs	a) medicines that decrease fever;
2. antipyretics	b) medicines that are used to calm down and relax the patient;
3. analgesics	c) medicines for relieving constipation;
4. emetics	d) solid medicines that are inserted into the rectum where they melt
5. hypnotics	and affect the body;
6. laxatives	e) medicines that relieve pain, they are also called pain-killers;
7. sedatives	f) medicines that produce vomiting;
8. suppositories	g) medicines that help to reduce inflammation;
	h) medicines that produce sleep.

VIII. Put the verbs into the correct form.

- 1. Emergency medical service always (to provide) out-of-hospital medical care.
- 2. Yesterday, the ambulance (to transport) him to the trauma unit.
- 3. I (to call) in an ambulance, if the temperature (to keep) rising.
- 4. The nurse (to close) the wound with adhesive plaster after she's cleaned it.
- 5. Emetics are the drugs that (to make) you vomit.
- 6. The dispatcher (to be) responsible for the "pre-arrival" instructions.
- 7. All the ambulances (to have) first-aid kits.
- 8. The ambulance driver (to transport) patients carefully.

IX. Translate into English.

1. Як правило, швидка допомога приїздить негайно. 2. Його миттю госпіталізували з такими ушкодженнями. 3. Її обережно транспортували до реанімаційного відділення. 4. Зеленка ϵ одним з найкращих коли-небудь відомих антисептиків. 5. Щоб заспокоїти пацієнтів, лікарі

іноді дають їм заспокійливе. 6. В машинах швидкої допомоги завжди ϵ тонометр, термометр, набір шин, носилки.

Unit 10. How to Write Medical Papers

Active vocabulary

establish встановлювати

initial початковий; попередній

affect вражати fits конвульсії

faint знепритомніти; непритомність, зомління

disturbance порушення vertigo запаморочення clue ключ (до розгадки)

elicit установлювати, виявляти

relevant доречний; що стосується справи

obtainотримуватиintoleranceнетерпимістьindigestionрозлад травлення

heartburn печiя account звiт

I. Read and translate the text.

How to Write Medical Papers

Taking a patient's history is the initial part of clinical examination and its main aim is to find out the patient's present problem and how it affects the quality of their life.

The history is a review of the patient's current state of health and past medical condition. When taken carefully, it may give valuable information about the nature of the patient's problem and provide the necessary clues to help the doctor establish a preliminary or differential diagnosis.

The history-taking process is a well established and commonly used sequence.

- 1.History of presenting complaint (HPC). The main symptoms should be clearly defined as soon as possible, to find out the cause of admission or seeking medical advice. The onset, severity, progression, associated features or symptoms are all important. A special focus is also made on pains associated or not with specific organs.
- 2. History of present illness (HPI). The patient is requested to give an account of recent events in their own words which in this way may be recorded in the history sheet.
- 3. Systemic enquiry (SE) also known as the review of systems (RoS). The history is taken of the main symptoms of the major bodily systems:

General: mood, fatigue, anorexia, fever, night sweats, rashes, heat/cold intolerance.

Cardiovascular system (CVS): chest pain, palpitations.

Respiratory system (RS): shortness of breath, cough, sputum, wheeze, hemoptysis.

Gastrointestinal system (GS): nausea, vomiting, indigestion, abdominal pain, heartburn, change in bowel habit.

Genitourinary system (GUS): nocturia, frequency, incontinence, change in color/smell of urine, menstrual difficulties.

Central nervous system (CNS): headaches, weakness, dizziness, fits, faints, vertigo.

- 4. Past medical history (PMH). Patients are asked about their previous medical/surgical diseases.
- 5. Drug history (DH) and allergies (ALL). Information is obtained on any medication prescribed, self-administrated drugs.
- 6. Family history (FH) provides information about any predis-position to disease, and relevant information on relatives.
- 7. Social history (SH). Information is collected about the patient's occupational, social, personal factors, such as habits, employment, housing, interests, sports, hobbies, physical exercises, the use of alcohol, tobacco, recreational drugs.

To accomplish the purpose, a set of the following practical tips has been developed:

- Show the patient your attention;
- Start by eliciting the presenting complaint;
- Let the patient tell story in their own words;
- Try not to interrupt;
- Use the language which the patient understands;
- Summarize the story for the patient to check, correct and add more relevant details;
- Obtain the patient's history also from other sources of information.

Having completed history taking, the doctor will perform the next stage of clinical examination, which is physical examination. The diagnostic process will proceed, but the first clues have already been obtained to formulate a preliminary diagnosis, which will help the doctor to develop their own approach to the patient's problem during physical examination.

II. Answer the questions.

- 1. What are the main components of clinical examination?
- 2. Why does taking history come first?
- 3. How does an interview usually start?
- 4. Why are systems reviewed?
- 5. Why are patients asked about their previous medical diseases?
- 6. What may drug history reveal?
- 7. What recommendations should be followed to get accurate information?
- 8. What is crucial in history taking?
- 9. Is it necessary to obtain the patient's history from different sources of information?
- 10. What information should be defined during taking history of presenting complaint?

III. Match English and Ukrainian.

present problem abdominal pain speech disturbance genetic diseases
speech disturbance genetic diseases
genetic diseases
6
present complains
previous diseases
differential diagnosis
cause of admission
to establish diagnosis

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.

IV. Match expressions with their definitions.

1.present complaint	a. details of patient's medical recorders over a period of time
2. history of present illness	b. all the symptoms of the diseases are present

3.systemic enq	uiry		c. recent ev	vents in the case	history		
4.past medical	history		d. review o	of systems			
5.family histor	y		e. records	e. records of earlier illnesses			
6.drug history			f. informat	f. information about parents, relatives			
1.	2.	3.		4.	5.	6.	

V.Complete the following sentence choosing suitable words from the box.

distur	bance	initial	give '	vertigo	genetic	previous	abdominal	obtained	
1.	The pa	itient giv	es a m	onth's l	nistory of	f	pain	l.	
2.	These	results a	re con	sistent v	vith		disease.		
3.	On a re	ecent vis	sit he c	omplair	ned of na	usea, vomi	ting and spee	ech	
4.	A thor	ough inc	quiry e	licited r	elevant s	ymptoms:	.	, faints and fits	•
5.	Having	g comple	eted his	story tal	king the o	doctor mad	le	diagnosis).
6.	Family	history	provid	ded info	rmation a	about		disease.	
7.	There	was			detailed	informatio	n on patient'	s relatives.	
8.	Practic	al recon	nmend	ations h	ave been	developed	l which help	to	_ diagnosis.

VI. What body systems are these questions related to?

Cardiovascular system (CVS)

Respiratory system (RS)

Gastrointestinal system (GS)

Genitourinary system (GUS)

Central nervous system (CNS)

Endocrine system (ES)

Ear, nose and throat (ENT)

- 1. Do you have any nausea, vomiting, diarrhea, dyspepsia?
- 2. Does your pain behind your breastbone irradiate to your back, neck, arm?
- 3. How long have you been having theses headaches?
- 4. Do you keep awake at night?
- 5. Have you any trouble with your stomach or bowels?
- 6. What's your appetite like?
- 7. Do you have any problems with your waterworks?
- 8. Are you still having your periods regularly?
- 9. Do you have pain in the chest, palpitation, swelling of the ankles?
- 10. What about coughs or wheezing or shortness of breath?
- 11. Are you diabetic?
- 12. Have you ever had nose bleeding?

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