<u>Inglese Scientifico</u> Christopher Berrie, PhD

Course materials

Week V

ANNO ACCADEMICO 2020-21: *I ANNO – infermieri* <u>Inglese Scientifico</u>

Medical abbreviations (acronyms) V

	Abbr./		Meaning
	acronym		
1	FBC	а	full blood count/ fluid balance chart
2	FH	b	family history
3	FOB	С	faecal occult blood
4	FUO	d	fever of unknown origin
5	GA	е	general anaesthetic
6	GB	f	gall bladder
7	GCS	g	Glasgow Coma Scale
8	GP	h	General Practitioner
9	GTN	i	glyceryl trinitrate
10	GTT	j	glucose tolerance test
11	GU	k	gastric ulcer
12	H ₂ O	I	water
13	Hb	m	haemoglobin

	Abbr./		Meaning
	acronym		
14	HCA	n	Health Care Assistant
15	HDU	0	high dependency unit
16	Нер В	р	hepatitis B
17	Нер С	q	hepatitis C
18	HR	r	heart rate
19	HS	s	heart sounds
20	HT	t	hypertension
21	hypo	u	hypoglycaemic attack
22	ICF	V	intracellular fluid
23	ICP	w	Integrated Care Pathway
24	ICS	x	intercostal space
25	ICU	У	Intensive Care Unit
26	IDC	z	indwelling catheter

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Prepositions practice

<u>Put a</u>	prepo	sition	from	the	boxes	into	each	gap:
(use	all of t	he pre	eposit	ions	given)		

<mark>in</mark>	<mark>in</mark>	<mark>in</mark>	<mark>in</mark>	<mark>in</mark>	<mark>in</mark>	<mark>in</mark>	<mark>in</mark>	<mark>in</mark>
<mark>at</mark>	<mark>at</mark>	<mark>at</mark>	<mark>at</mark>	<mark>at</mark>	<mark>at</mark>			
<mark>of</mark>	<mark>of</mark>	<mark>of</mark>	<mark>of</mark>					
<mark>than</mark>	<mark>than</mark>	<mark>than</mark>		_				
to	to							
<mark>for</mark>	<mark>for</mark>							
<mark>from</mark>	<mark>from</mark>							
<mark>near</mark>		_						
<mark>on</mark>								
with								

1. Can you buy me a bottle OF milk when you go TO the shop.
2. What have we gotFOR dinner tonight?
3. Our hotel is 50 metresFROM the supermarket, but only 20 metresFROM
the sea.
4. What is the longest river IN the world? What country is it IN ?
5. France is bigger THAN England, but Australia is bigger THAN France.
6. I'm looking FOR Jane. Do you know where she is? Is she AT school today?
7. LookAT this photo. It is a photoOF the sunset from my bedroom.
8. Marmalade is like Jam, but it is made OF oranges and lemons.
9. Come and see meIN my officeAT seven o'clock.
10. What did you do ON Saturday? I played football IN the park WITH
my son.
11. We went shoppingIN the morning, but stayedAT homeIN the
evening.
12. I would rather live IN London THAN New York.
13. As we get NEAR to Christmas, the shops are full OF people AT the
weekend.
14. My family left London and moved TO a small village IN Scotland.
15. He stayed AT a hotel IN Oxford.

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Comparisons

Adjective	Comparative	Comparison
Cheap	Cheaper	For buying books, Amazon is cheaper than Feltrinelli.
Dirty	Dirtier	Your car is dirtier than mine.
Fast	Faster	John's motorbike is faster than Steven's.
Safe	Safer	Flying with Alitalia is safer than flying with RyanAir.
Friendly	Friendlier	The English are friendlier than the Germans.
Big	Bigger	His house is a lot bigger than your house.
Good	Better	He is better at tennis than Fred.
Healthy	Healthier	Vegetables are healthier for you than chocolate.
Noisy	Noisier	The children in his class are noisier than those in my class.
Hot	Hotter	In summer, it is hotter in Italy than in Norway.

Quantities

Use "some" or "any" in the following sentences:

1. I don't haveANY money in my pocket, but I haveSOME money in the bank.
2. Are thereANY letters for me?
3. I never haveANY breakfast. I'm not hungry in the morning. I just have
SOME coffee.
4. Do you haveANY pictures in your house?
5. Are you Canadian? I have SOME good friends in Canada.
6. Don't buyANY bread in the shops. There isSOME in the kitchen.
7. Have you gotANY brothers or sisters?
8. There aren'tANY shops in my village, but there areSOME in the next
village.
9. I wantSOME cheese, please. Is thereANY cheese in the fridge?
10.SOME people like flying, but other people don't.
11. There wasn'tANY rain yesterday, but there wasSOME rain during the
night.
12. People couldn't sit down at the party, because there weren'tANY chairs.
13. I couldn't take ANY photos on holiday, because the weather was bad.
14. We couldn't buyANY food in the supermarket, because we had no money.
15. I'd like to wash my hair, so I need SOME shampoo.
16. I need to put SOME petrol in the car. It's nearly empty. Do you have _ ANY _ money?
17. Do you haveANY stamps. I don't haveANY, but I need to post these
letters.
18. There were SOME very interesting people at the party last night.
19. I want SOME books from the library.
20. If you haveANY money, we can buySOME beer.

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Making questions: Put the words in the right order to make the questions.

1. tennis do how you often play \rightarrow **How often do you play tennis?**

2. you lunch usually do eat where →Where do you usually eat lunch?

3. night how study you last did long \rightarrow **How long did you study last night?**

4. like you of kind what do novels
→What kind of novels do you like?

5. do work of kind do what you →What kind of work do you do?

6. many you TV how a watch do day hours

→How many hours a day do you watch TV?

7. week what day your is the of busiest →What is your busiest day of the week?

8. mother is good your cook a \rightarrow **Is your mother a good cook?**

9. TV Saturday on what night on is \rightarrow **What is on TV on Saturday night?**

10. do walk you take for dog where a your

→Where do you take your dog for a walk?

11. did yesterday do you what → What did you do yesterday?

12. you what lunch drink like to your do for

→What do you like to drink with your lunch?

13. eat you night where last did \rightarrow Where did you eat last night?

14. Rome week what in next you going do are to

→What are you going to do in Rome next week?

15. this do what afternoon you will \rightarrow **What will you do this afternoon?**

16. sea how restaurants by Pescara in are the many

→How many restaurants in Pescara are by the sea?

17. going this Mike where is weekend \rightarrow Where is Mike going this weekend?

18. do where do homework you your → **Where do you do your homework?**

19. go in John visit did Rome to when you

→When did you go to visit John in Rome?

20. this did take when picture you → When did you take this picture?

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Jenny, the Ward Nurse, is handing over a patient, Mrs Small, to the afternoon shift. Listen to what she says about Mrs Small from her patient record at the handover:

THE ALEXANDRA HOSPITAL

PATIENT RECORD

Hosp. No: 324710 Surname: Small

Given name(s): Gladys

DOB: 15.11.1935

DATE & TIME	Add signature, printed name, staff category, date and time to all entries
	MAKE ALL NOTES CONCISE AND RELEVANT
	Leave no gaps between entries
4.2.2008	Mrs Small admitted 01:55 hrs; poorly managed HT. Cannot cope at home. GP
02:00 hrs	Dr Fielding; admitted for 3 d for obs. HT on admission, BP 173/101, P 86. At
	06:00 hrs BP stable 175/90, P 76. At 10:00 hrs, BP 210/130, P112. c/o chest
	pain. Dr Fielding called, did ECG, given GTN s.l. At 14:00 hrs BP 195/90, P
	97. Obs. At 15:00 hrs, BP down 180/85, P 86. No further chest pain.
	U, Vones (RN) JONES

Jenny: Alright, now I'll just let you know about Mrs Small's BP. As you know, she was admitted just before 2am yesterday with poorly managed hypertension. She's quite elderly and trying to cope at home, but the previous medication wasn't working well for her at all. Dr Fielding wants to put her on something else and wants to monitor her BP in hospital over 3 days. If you look at her Obs. Chart from yesterday, you'll see that she was quite hypertensive on admission. BP was one hundred and seventy-three over one hundred and one, pulse eightysix. At 6am, her BP was about the same, one seventy-five over ninety, and pulse seventy-six. During the morning shift at 10am she shot up to two hundred and ten over one thirty, with a pulse of a hundred and twelve. She had some chest pain too. Dr Fielding came up to see her about the chest pain and high BP. He did the usual things for her, ECG, GTN sublingually, and she settled a bit by 2pm. By two, her BP was one ninety-five over ninety and her pulse was ninety-seven. I took her obs. again at 3pm, just before handover. She's gone down to one eighty over eighty-five with a pulse of eighty-six. Dr Fielding is happy with that, but just keep an eye on her, will you?

Answer the following questions

- 1. What time was Mrs Small admitted at? Five to two in the morning.
- 2. Why is she in hospital?

 Poorly managed hypertension at home.
- **3.** Was she hypotensive on admission? **No. She was hypertensive.**
- **4.** How long will she be in hospital for? **Three days.**
- **5.** What was her highest blood pressure? **210/130.**

- **6.** When did this occur? **At 10am.**
- **7.** Did Mrs Small have chest pain? **Yes.**
- **8.** What did Dr Fielding prescribe? **Glyceryl trinitrate, sublingually.**
- **9.** Did Mrs Small have an EEG? **No. She had an ECG.**
- 10. What did Jenny do before handover? She took Mrs Small's 3pm observations.

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Patient Records

Registered Nurse, David Simpson, has just finished writing up the notes for Mrs Oondahi. Check what he has written and answer the questions below.

THE ALEXANDRA HOSPITAL

Hosp. No: 399429
Forename(s): Fatima
Surname: Oondahi

DOB: 05.09.1948 **Sex:** Female

PATIENT RECORD

DATE & TIME	Add signature, printed name, staff category, date and time to all entries
	MAKE ALL NOTES CONCISE AND RELEVANT
	Leave no gaps between entries
02.03.09	Mrs Oondahi appears to be breathing comfortably at the time of the report
21.00 hrs	and is quite settled. RR is 16, not laboured. $O_2 @ 3$ L/min via nasal cannula.
	Pt lying on two pillows. Pain relieved by morphine via continuous s.c.
	infusion. Pain rated at 1/10 at 20.30 hrs. Pt states she is comfortable. Family
	in attendance all shift. Husband and children will stay overnight with her.
	D. Simpson (RN) SIMPSON

- **1.** What is her respiration rate? **Sixteen.**
- **2.** Is she feeling comfortable? **Yes.**
- **3.** Is she having trouble breathing? **No.**
- **4.** How much oxygen is she on? **Three L/min.**
- **5.** How is her oxygen administered? **Nasal cannula.**

- **6.** How has her pain been relieved? **Morphine.**
- 7. How is her morphine administered? Continuous subcutaneous infusion.
- **8.** When was her pain score last checked? **At 08:30 pm.**
- 9. What was her pain rating?One, on a range to 10.
- 10. Is she alone on the ward?No. Her family are with her.

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Patient Records

Mr Wilmott is an 86-year-old man who lives alone. He has been admitted to hospital for treatment. Look at his Admission Record and answer the questions below.

THE ALEXANDRA HOSPITAL

PATIENT RECORD

Hosp. No: 593712 Forename(s): Ronald Surname: Wilmott

DOB: 15.09.1922 **Sex:** Male

DATE & TIME	Add signature, printed name, staff category, date and time to all entries				
	MAKE ALL NOTES CONCISE AND RELEVANT				
	Leave no gaps between entries				
11.00	New admission to the ward with a diagnosis of poorly managed asthma.				
28/03/08	Recent URTI treated with antibiotics. Pt. still c/o SOB. RR elevated. For CXR				
	and review by Respiratory Team in am. Started on p/f readings and Pt ed.				
	regarding asthma				
	G. Desaney (RN) DELANEY				

- **1.** What is Mr Wilmott's first name? **Ronald.**
- 2. What year was he born in? 1922.
- **3.** What time was he admitted? **At 11:00 am.**
- **4.** In what month was he admitted? **March.**
- 5. What was his diagnosis?Upper respiratory tract infection.

- **6.** Was he breathing well? **No.**
- **7.** What is his treatment? **Antibiotics.**
- **8.** What other analysis did he have? **Chest X-ray.**
- **9.** When did the Respiratory Team arrive? **In the morning.**
- **10.** What respiratory assessment has he started doing himself?

Peak flow readings for breathing.

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Patient Records

THE ALEXANDRA HOSPITAL

Hosp. No: 619237 Forename(s): Fred Surname: Cummins

DOB: 17.02.1955 **Sex:** Male

PATIENT RECORD

DATE & TIME	Add signature, printed name, staff category, date and time to all entries			
	MAKE ALL NOTES CONCISE AND RELEVANT			
	Leave no gaps between entries			
20.05.2008	Mr Cummins was hypertensive this am. BP elevated to 180/100 and P 86 at			
15.30 hrs	10.00 hrs. c/o headache. Pt. stated he had no chest pain. Given paracetamol			
	1 g with good effect. Headache relieved. BP checked at 10.30 hrs. BP			
	decreased to 150/85, P 77.			
	S. Suile (RN) STOTTLE			

THE ALEXANDRA HOSPITAL

PATIENT RECORD

Hosp. No: 213498 Forename(s): Polly Surname: Lancaster

DOB: 14.06.1942 **Sex:** Female

DATE & TIME	Add signature, printed name, staff category, date and time to all entries
	MAKE ALL NOTES CONCISE AND RELEVANT
	Leave no gaps between entries
20.05.2008	Mrs Lancaster had a restless night. c/o chest pain at 02.15 hrs. Night SHO
21.00 hrs	called. BP 215/105, P 92 at 02.20 hrs. ECG ordered and attended by nursing
	staff. O ₂ via mask and GTN administered. BP dropped to 180/86, P 82 at
	02.40 hrs. No c/o further chest pain.
	L. Knight (RN) KNIGHT

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Respiratory problems

Listen to the Asthma Clinic nurse **Eleanor** explaining to **Mrs Drake** how to use a peak flow meter, so that she can monitor her asthma at home. (2.1)

Eleanor: Good morning, Mrs Drake. How are you?

Mrs Drake: Much better, thank you. My chest feels less tight, and I'm breathing much better now.

Eleanor: That's great. I'm going to show you how to use a peak flow meter today. Would you mind if I go through it with you now? You'll have to use one regularly to keep an eye on your asthma at home.

Mrs Drake: No, that'll be fine. I'm happy to do anything which will stop me going back into hospital.

Eleanor: Yes, it's much better to manage it at home. Now, I'd like you to use this peak flow meter at the same time every day.

Mrs Drake: Oh, alright. Is that important? I mean, is it important to use it at the same time every day?

Eleanor: Yes. It's so that you can compare the readings. It's better if they are taken at the same time each day.

Mrs Drake: Oh, I see.

Eleanor: Another thing – could you record your readings in this Daily Record Chart, please? I've got one for you here.

Mrs Drake: Right. So I take the peak flow reading at the same time every day and record it in this Daily Record Chart?

Eleanor: Yes. That's right. You just write the details along the line for that day, like this. Something else which is important is, I'd like you to bring the Daily Record Chart with you every time you come here to the Asthma Clinic.

Mrs Drake: Alright, I'll do that. So, just so I know I have it correct: I take the reading every day at the same time, then I write the result on my Daily Record Chart, and I mustn't forget to always bring the chart to the Asthma Clinic. I'll never remember all that!

Eleanor: Don't worry, it'll become a habit.

Choose the correct answers to the following questions about Eleanor and Mrs Drake:

- 1. How does Mrs Drake feel?
- A. Here chest feels tight.
- **C.** She feels worried.

- B. She feels fine.
- **D.** She feels that she cannot breathe.
- 2. Why is Eleanor teaching Mrs Drake how to use a peak flow meter?
- **A.** So Mrs Drake can go home.
- **B.** Because Mrs Drake needs to come into the hospital
- C. So Mrs Drake can manage her asthma in hospital.
- **D.** So Mrs Drake can manage her asthma at home.

- 3. At what time of day should she take the reading?
- A. Any time.

B. In the morning.

C. The same time each day.

- **D.** In the evening.
- 4. What are the three things that Mrs Drake needs to remember. Choose from the list:
- **A.** She must go to the toilet before taking a reading.
- **B.** She must forget the result immediately.
- **C.** She must always keep the chart at home.
- **D.** She must take the reading every night
- **E.** She must write the result in her diary.
- F. She must send the chart to the Clinic by post.
- G. She must bring the chart with her to the Clinic.
- H. She must write the result on the Daily Record Chart.
- I. She must take the reading every morning
- J. She must take the reading at the same time each day.

Peak Flow: Daily Record Chart

Peak Flow Tracking Chart

Peak flow monitoring is part of the ongoing process of managing your asthma. Tracking your peak flow helps you become aware of the changes in symptoms, triggers, and even in the way your body responds to medication. Keeping these records can help you work with your doctor to keep your asthma action plan working effectively.

Ideal peak flow number:				
Know the early warning signs of				
a sudden asthma attack:				
Shortness of breath Tightness in your chest Difficulty breathing Wheezing Coughing Drop in peak flow number				
Special Instructions				
Use this space to write down any special information or instructions you receive from your doctor.				

Name

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Respiratory problems (continued)

The Asthma Clinic nurse **Eleanor** continues to explain to **Mrs Drake** how to use a peak flow meter, so that she can monitor her asthma at home. (2.2.)

Eleanor: If you're ready, I'll just show you how to use the peak flow meter. It's easy to use. You just need to follow some simple instructions. I'll go through it with you.

Mrs Drake: Alright, thanks.

Eleanor: Right. First of all, just move the red indicator to the bottom of the numbered scale, like this.

Mrs Drake: Yes, I can see where the indicator goes.

Eleanor: Now, stand up. Take a deep breath and try to fill your lungs as much as you can. Like this. Place your lips tightly around the mouthpiece. Could you show me? Yes, that's right. Next, blow as hard and as fast as you can with one breath. Have a go! That's great. Make a note of the final position of the marker. That's your peak flow reading. After that, I want you to blow into the peak flow meter two more times. The last thing to remember is to record the highest of the three readings on your Daily Record Chart.

Mrs Drake: Oh. So I have to do three readings every time.

Eleanor: Yes, that's right. Take three readings, but only record the highest on your chart. Do you have any questions?

Mrs Drake: No. I think I've got it all.



Peak flow meter

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Respiratory problems (continued)

Mr Dwyer's treatment plan for his asthma management is being changed. Listen to Ward Nurse **Melanie** giving **Mr Dwyer** instructions on how to use a nebuliser for the first time. (2.3)

Melanie: Hello, Mr Dwyer. I'd just like to show you how to use this nebuliser. I'll bring a chair up so I can have a chat with you. You haven't used one of these before have you?

Mr Dwyer: No, this is all new to me. I've been using an inhaler for years now, but this time it just wasn't enough.

Melanie: Well, let's hope you only need the nebuliser for acute attacks. The inhaler should be enough as a regular preventer.

Mr Dwyer: OK, so what do I have to do?

Melanie: Right. Well, I'll go through all the steps with you. It's not too difficult. I'm sure you'll catch on quickly. First of all, fill the chamber of the nebuliser with inhalant medication. The inhalant solution is in these small plastic nebules.

Mr Dwyer: OK. I put the solution into the chamber here. That's right, isn't it?

Melanie: Yes, that's the right place. Now, attach the tubing to the oxygen outlet on the wall. It's this outlet here, not the other one. That's for something else. That's quite important. Um, are you OK with that?

Mr Dwyer: Right yes, I've got that.

Melanie: Next, put on the mask, and tighten the elastic straps so that it fits snugly around the head. I'll show you.

Mr Dwyer: Yes, I see. Got it.

Melanie: After that, turn on the oxygen... so the liquid medication turns into a fine mist. I'll just turn it on. You should put it at around 6 litres.

Mr Dwyer: I see. It's starting to fizz up.

Melanie: Mm. Yes, that's the idea. Finally, inhale the mist until it's finished.

Mr Dwyer: OK. And then I just turn it off?

Melanie: Yep, until the next time. Any questions?

Mr Dwyer: No. I think you've covered everything. Thanks, I'll be fine with it.

Melanie: Yes, I'm sure you will. I'll check on you when you are ready for the next dose.

1.	When using the nebuliser,	which things do you	have to do first, a	and in what order?
a.	Breathe in the mist.	5		
b.	Turn on the oxygen.	4		
C.	Put on the mask.	3		
d.	Put in the medication.	1		
e.	Connect to the oxygen.	2		

- **2.** What do the following phrases mean:
- a. "bring a chair up"
- **b.** "it just wasn't enough"
- c. "acute attacks"
- $\mbox{\bf d.}$ "tighten the elastic straps"
- **e.** "fits snugly around the head"
- f. "turns into a fine mist"
- **g.** "to fizz up"
- **h.** "you've covered everything"
- i. "I'll check on you"



Nebuliser