

ENGLISH FOR MEDICAL PRACTITIONERS

**NOT ONLY FOR
EMERGENCIES**

Dominique Neyts and Catherine Verguts



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As a medical practitioner, be it a general physician, specialist, medical student, nurse, dentist or physiotherapist, you have the professional medical skills to deal with patients, colleagues and health institutions. However, you may to some extent lack the language skills to accurately and effectively do so in English, and want to improve your English communication proficiency, e.g. because you have patients for whom English is your only common language, or because you plan to train or work in an international setting.

This book focuses on the language and communication skills you need. It aims at improving your English proficiency, thus enhancing your confidence and effectiveness in medical interactions. The course will train you how to communicate in English in a wide range of situations, based on authentic professional contexts. There are 6 units of exercises, each focusing on a particular aspect of medical practice: medical education and job skills (terminology, cultural awareness, job descriptions, tasks and skills), patient intake (taking a history, responding adequately to patients, asking about symptoms and pain), anatomy (anatomical systems and the associated disorders and symptoms), examinations (giving instructions, explaining procedures, reassuring the patient), diagnosis and treatment (making a diagnosis, discussing treatment and medication), and prevention and screening (social history, lifestyle, immunization, infectious diseases). A reference section complements the class exercises with more in-depth background information, detailed vocabulary lists, typical phrases used in medical practice and a grammar chapter.

The listening extracts can be found on the online learning platform Ufora (UGent). Here, we will also post complementary exercises (discussion topics, extra listening exercises, etc.), interesting links and up-to-date information accompanying this course book.

The book is designed to cover a 20-hour course, but there is enough material to elaborate on some exercises or omit others, based on the specific needs. Two hours have been allotted for units 1 and 6; four hours for units 2, 3, 4, 5. You can also use this book for independent study and concentrate on those areas that are specifically helpful to you (both in the exercises and in the reference section). The entry level is upper-intermediate (B2 of the Common European Framework).

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Do not only open in case of an emergency!

Dominique Neyts and Catherine Verguts

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EXERCISES

Unit 1

Medical education and practice

TOPICS COVERED IN THIS UNIT

- communication skills:
 - using common professional statements in several practices
 - describing job tasks and requirements
 - discussing current issues in healthcare
 - presenting arguments pro or contra in matters of medical education
- vocabulary:
 - job titles in medical practice
 - medical education
 - collocations (typical word combinations)
 - (para-)medical skills
- language focus:
 - defining (para-)medical professions
 - skimming texts and summarizing
- writing skills:
 - typical features of a CV

Exercise 1: Professional statements

A. Which of the following statements are the most common in your own (para-)medical practice? Choose 3.

1. Do you have any trouble walking?
2. I will first take your medical history.
3. Have there been any new admissions last night?
4. Well done! You have lost another 2 kg. How do you feel about the start-to-run programme?
5. Could you accompany me on my ward round next Tuesday?
6. You will be put on a waiting list for your hip replacement operation.
7. The next tutorial in the training programme has been postponed to Friday 5 March.
8. We only perform minor surgery.
9. We refer to our report for further information on the identification of the deceased, the time and cause of death, and the type of weapon used.
10. A 55-year-old man, who had been well until five months previously, complained of tiredness. He had gained 15 kg in weight. His presenting symptom was constipation.
11. I will visit you at home after your hernia operation.
12. The incubation period is the period between the invasion of the tissues by pathogens and the appearance of clinical features of infection.
13. I'm afraid your wife has been diagnosed with obsessive-compulsive disorder.
14. If you have any problems tracing the pulmonary artery in this cadaver, please call me over.
15. Here are some exercises you can do at home to improve your knee joint flexibility.
16. Did your colleagues notice any involuntary movements while you were unconscious?
17. Our main objective is to diagnose and investigate health hazards in this community.

B. Link the statements in part A to the following professions.

- A. lecturer
- B. clinical trainer
- C. general practitioner (GP)
- D. receptionist
- E. practice nurse
- F. district nurse
- G. physiotherapist
- H. anatomy demonstrator
- I. forensic expert / forensic pathologist
- J. healthcare official

C. Discuss in pairs: in what way do your 3 statements from A typically illustrate your job tasks? And which statements from A are not typical at all? Why?

D. Present your neighbour to the group without mentioning his / her job title. Can they deduce the specific medical profession?

Exercise 2: (Para-)medical job titles

A. Match the following (British!) job titles with the definitions below.

1. theatre nurse
2. health visitor
3. GP
4. paramedic
5. clinician
6. midwife
7. registrar
8. medical assistant
9. consultant

1	2	3	4	5	6	7	8	9

- a. a trained person who is usually a qualified nurse and is employed to visit nursing mothers in their homes and advise them on health matters
- b. a general term for doctors, nurses and other professionals working directly with patients in all parts of the health service
- c. a nurse who assists a surgeon during operations
- d. a doctor who is trained in general medicine and provides primary and continuing medical care for patients in a particular area or town
- e. a trained non-medical member of the ambulance service who can provide immediate care in an emergency
- f. a nurse who specializes in the delivery of babies
- g. a doctor who has completed the Foundation Programme (2 years of post-graduate training) and is training in one of the medical specialties
- h. a fully qualified specialist who is called in for professional advice or services in a particular area of medicine
- i. a person who performs a variety of patient-related tasks / tests, ensuring smooth patient and work flow in the clinical practice

B. Complete the following definition of *physician*ⁱ.

A physician is a professional who pr_____ medicine, which is concerned with promoting, maintaining or re_____ human health, through the study, diagnosis, and tr_____ of disease, inj_____, and other ph_____ and mental impairments.

Physicians may focus their practice on certain disease categories, types of patients, or methods of treatment (specialist medical pr_____), or assume res_____ for the provision of continuing and comprehensive medical c_____ to individuals, families, and communities (general pr_____). Medical practice requires a detailed knowledge of the academic di_____ (such as anatomy and ph_____), of underlying diseases and their treatment (the science of medicine), and also a decent com_____ in its applied practice (the craft of medicine).

The et_____ of medicine require that physicians show con_____, compassion and benevolence towards their patients.

In the United States and Canada, the term *physician* describes all medical pra_____ holding a professional medical de_____.

C. Add these words / phrases to the nouns in the table to make correct collocations.

emergency - university entrance - flying - locum - follow-up - recommended - group - to swallow - to be in - psychiatric - to meet - family - herbal - a doctor in general - nursing - to seek - to administer - to send for a - to qualify in - to practise - to undergo - a dose of - to respond to - to comply with - dietary

	treatment
	practice
	medicine

	doctor
	requirements

D. Work in pairs. Choose 2 terms you are both familiar with. Identify the main tasks and requirements for each job.

Example:

A **visiting nurse** is a nurse employed (by a hospital or social-service agency) to perform public health services (e.g. promoting health and well-being, assisting in prevention programmes) and to visit and provide care for sick persons in a community. A visiting nurse needs to be able to cope with stress situations (for instance emotional, physical and financial stress in home healthcare) and needs to be available in crisis situations. Required skills include empathy, basic medical expertise, use of laptop, and multicultural sensitivity. (also called public health nurse)

- registered nurse
- practical nurse
- nurse practitioner
- general duty nurse
- circulating nurse
- charge nurse

1. _____ :

2. _____ :

E. Look at these duties of a nurse¹. Fill in the gaps.

1. Tri_____ : the nurses will take in the patients' information and they will categorize or prioritize according to the se_____ and the complications of a particular injury or ailment. Some people may be taken in first, if there is a high risk of spreading, or if there are cases of unc_____ bleeding, unexplained rashes or unexplained vomiting.
2. Est_____ IVs or other medical devices.
3. Fo_____ the doctor's orders and upd_____ the doctors with new suggestions of patient care. This may inc_____ coordinating tests such as blood tests, diagnostic imaging, biopsies.
4. Dis_____ medications (e.g. by mouth, by inhaling, IV, rectally).
5. In_____ catheters: to permit injection, to dr_____ fluids, or to allow access by surgical instruments.
6. Pr_____ emotional and physical support to patients (and their families): this is very important as the patients are in a vuln_____ state.
7. Tra_____ a patient from a bed to a chair or a wheelchair, or from a wheel chair to a shower.
8. Help with personal h_____ and dressing.

F. Discuss (one of) the following statements.

- Nurses' responsibilities are increasing. This is a positive evolution for healthcare in general.
- Engaging physician assistants¹ in hospitals will solve the medical practitioners' complaints about workload and fatigue.
- A nurse's job equals that of a doctor, except for the salary.
- The medical profession is 1/3 education, 1/3 experience and 1/3 vocation.

¹ Definition from Merriam-Webster: a specially trained person who is certified to provide basic medical services (as the diagnosis and treatment of common ailments) usually under the supervision of a licensed physician— also called PA

Exercise 3: Medical education

A. Read the information on your card. Card A is found here; go to ‘role-plays’ for card B. Summarize in the box by means of keywords.

Card A: United Kingdom:

In the UK, doctors wishing to become GPs (general practitioners) take at least 5 years training after medical school, which is usually an undergraduate course of five to six years (or a graduate course of four to six years) leading to the degrees of Bachelor of Medicine and Bachelor of Surgery.

Graduated medical practitioners have to do a minimum of 5 years postgraduate training:

- two years of clinical *Foundation Training (F1 and F2)*, in which the trainee will do a rotation around either six 4-month jobs or eight 3-month jobs - these include at least 3 months in general medicine and 3 months in general surgery, but will also include jobs in other areas;
- A three year “run-through” GP Specialty Training Programme containing (GPSTP) 18 months as a Specialty Registrar in which time the trainee completes a variety of jobs in hospital specialties such as obstetrics, gynaecology, paediatrics, geriatric medicine, accident and emergency or psychiatry and 18 months as a GP Specialty Registrar in General Practice.
- During the GP specialty training programme, the medical practitioner must complete a variety of assessments in order to be allowed to practise independently as a GP. There is a knowledge-based exam with multiple choice questions called the Applied Knowledge Test (AKT). The practical examination takes the form of a “simulated surgery” in which the doctor is presented with 13 clinical cases and assessment is made of data gathering, interpersonal skills and clinical management (Clinical Skills Assessment (CSA)). Throughout the year the doctor must complete an electronic portfolio which is made up of case-based discussions, critique of videoed consultations and reflective entries into a “learning log”.
- Trainee GPs from 2008 onwards are compulsorily required to obtain the postgraduate qualification issued by the Royal College of General Practitioners in order to be able to practise. After passing the exam or assessment, they are awarded the specialist qualification of MRCPGP (Member of the Royal College of General Practitioners). Previously qualified general practitioners (prior to 2008) are not required to hold the MRCPGP, but it is considered desirable. In addition, many hold qualifications such as the DCH (Diploma in Child Health of the Royal College of Paediatrics and Child Health), and/or the