

English for Nursing



Nursing is one of the fine arts: I had almost said 'the finest of fine arts.'
- Florence Nightingale

Tim Bahasa Inggris



**STIKES
WIDYAGAMA
HUSADA**

English for Nursing

TIM BAHASA INGGRIS



STIKES WIDYAGAMA HUSADA

Contents

Preface	i
General Assessment	1
Hospital Admission	5
Pain & Symptoms	7
Patient Positioning	13
Checking Vital Sign	16
Medication	19



Preface

This module is intended to be used in the course ***Bahasa Inggris Keperawatan*** attended by the students of the sixth semester of Nursing Program in Widyagama Husada School of Health Malang.

The module is developed to fulfill the needs of the students to have appropriate English skills for communication in job related setting. The selection of materials is partly based on the students' possible target situation. The module is composed to improve the 4 skills: listening, speaking, reading and writing with the focus on speaking skill.

Despite the team's efforts to make this module as comprehensive as possible, there might still be flaws and other kinds of imperfection. It provides a room for improvement and, therefore, any constructive feedback is welcome. The developed module is expected to contribute to the effectiveness of the teaching and learning process and the possible revision, if any, will make it even more valuable for the improvement of students' speaking (as well as listening, reading and writing) skills.

Malang, January 2022

English Lecturer team

This page is intentionally left blank

1

General Assessment

1. Asking Personal Data

Vocabulary

- Surname
- Next of kin
- Assess
- Assessment



Useful Expressions

a) Implementation step

Study these expressions to initiate communication.

Explaining what you are going to do immediately.

- | | |
|---|--|
| <ul style="list-style-type: none"> • It is time for me to • I just want to • I would like to • I am going to • I need to | <div style="font-size: 3em; line-height: 1;">}</div> <p>interview you.
assess your health condition.</p> |
|---|--|

b) Questions to collect demographic data elements

Study and practice these expressions.

Questions to Ask	
NAME	<ul style="list-style-type: none"> • What is your name? • What is your complete name? • What is your surname?
AGE	<ul style="list-style-type: none"> • How old are you?

ADDRESS	<ul style="list-style-type: none"> • What is your address? • Where do you live?
PHONE	<ul style="list-style-type: none"> • Your phone number, please • What is your phone number? • Do you have a mobile phone number?
MARITAL STATUS	<ul style="list-style-type: none"> • Are you married?
HEALTH INSURANCE	<ul style="list-style-type: none"> • Do you have any health insurance?
OCCUPATION & QUALIFICATION	<ul style="list-style-type: none"> • What is your occupation? • What do you do? • What is your academic qualification?
NEXT OF KIN	<ul style="list-style-type: none"> • Who is your next of kin?
REASON FOR CONTACT*)	<ul style="list-style-type: none"> • What brings you to this hospital? • Who sends you to this hospital? • What makes you come to this hospital?

*) It is a reason that makes you come to the hospital. It can be a chief complaint, medical checkup, and so on.

ACTIVITY 1 → ROLE PLAY (IN PAIR)

Interview your partner.
 Fill in the blanks with his/her personal demographic data.

Name:

Age:

Sex:

Address:

City, State:

Phone:

Religion:

Marital Status:

Health Insurance:

Occupation & Qualification:

Next of Kin:

Reason for contact:

Date, time of contact:

2. Current Health and Illness Status

Useful Expressions: Assessment step

Study these questions to initiate communication.

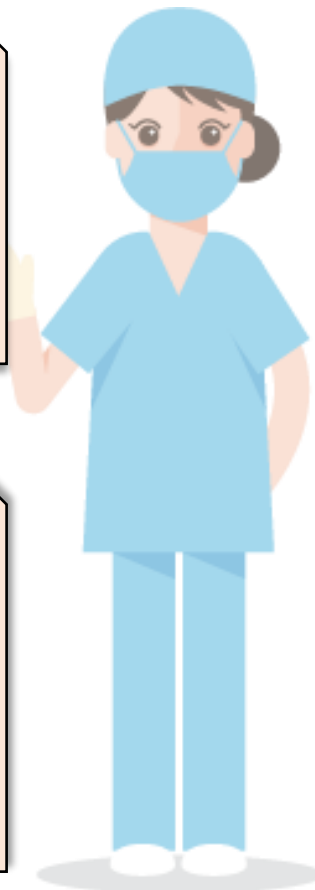
CURRENT HEALTH STATUS

- What do you think about your health?
- Would you tell me about your health condition recently?

Sample of patient's response: *"I'm usually healthy, have usual cold, and have to take medicine for high blood pressure."*

ELIMINATION PATTERN

- Would you tell me about your...?
- How many times a day do you do your...?
- Do you have any problem with your...?
 - Bowel movement?
 - Waterworks?
- Is the stool formed or loose?
- Is your waterworks sluggish?



3. Medical Records

Useful Expressions:

Assessment step → Asking Common Communicable Diseases

Study these questions to ask patient's diseases.

- Have you ever had + **a kind of disease**...?

Response: Yes, I have/No, I haven't

- How old were you when you got it?

Response: I was about ... years old.

- Are you allergic to... (certain food/medication)?

(Example: Are you allergic to penicillin/antibiotic?)

Sample of patient's response: "I'm usually healthy, have usual cold, and have to take medicine for high blood pressure."

Useful Expressions:

Assessment step → Asking about Immunizations

Study these questions to check patient's immunizations status.

- Have you ever been immunized against + (**a kind of disease**)?
 - Have you ever got ... + (**a kind of disease**) immunizations?
 - Are you allergic to... (certain food/medication)?
- (Example: Have you ever got polio immunizations?)*



Source: Pinterest

2

Hospital Admission

Grammar

Choose the correct option to complete the sentences.

- 1 The patient *is arriving / arrives / arrived* at 9.45 p.m. last night.
- 2 We *didn't called / didn't call / calling* an ambulance, because it wasn't necessary.
- 3 Did you *catch / caught / caught* your cold at school?
- 4 I *walked / am walking / was walking* when the dog attacked me.
- 5 A Did she interview the patient? B Yes, she *did / interviewed / do*.
- 6 What were you doing *while / when / during* you broke your leg?
- 7 She *didn't / wasn't / were* concentrating while she was driving.
- 8 They *were / was / been* in a fight.

Key words from the unit

Cubicle	life-threatening	prescriptions
treatment	allergic	assessment
limbs	appointments	



- 1 A triage nurse makes an initial _____.
- 2 A snake bite can be _____.
- 3 Sometimes it is difficult to read _____.
- 4 Receptionists make _____ for patients.
- 5 Arms and legs are called _____.
- 6 The doctor decides on the correct _____.
- 7 The patient is _____ to certain antibiotics.
- 8 Go into the _____ to get undressed.

Reading Comprehension

There are three ways to admit a patient to hospital: either as an outpatient, a day patient or an inpatient. An outpatient needs treatment but not a bed. A day patient needs a bed for a few hours, but doesn't need to stay overnight. An inpatient needs at least one overnight stay.

Hospitals need to plan for patient admissions. They have to predict how many beds they will need. It is quite easy to predict referrals from doctors like General Practitioners, but a larger number of patients come through A&E, and it is more difficult to plan for them. It is very important to keep accurate records of patients' treatment, from admission through to discharge and follow-up. These include personal details such as marital status, occupation and next of kin, as well as medical history such as past illnesses and treatments, family history and lifestyle.

Medical staff record all treatments, test results and correspondence. They try to record these things at the time they happen. This is important, and not only to ensure the correct treatment. Medical records are sometimes used for research, or in a court of law.

According to the text, are the following statements true (T) or false (F)?

- 1 Admissions to hospital are all inpatients. _____
- 2 There are more emergency admissions than referrals. _____
- 3 Hospital records stop at discharge. _____
- 4 Personal details are part of medical records. _____
- 5 Staff should record treatments at the end of their shift. _____
- 6 Only medical staff can look at medical records. _____

Vocabulary

Match the words or phrases 1–7 to a suitable definition a–g. The first one is done for you.

- | | |
|-------------------------|--|
| 1 <i>overnight stay</i> | a when a patient is sent to hospital |
| 2 admission | b normal, everyday behaviour |
| 3 referral
hospital | c treatment after a patient has been discharged from |
| 4 discharge | d <i>time as an inpatient</i> |
| 5 follow-up | e letters, emails and messages |
| 6 correspondence | f the moment when a patient enters hospital |
| 7 lifestyle | g when a patient is told they can leave hospital |

3

Pain & Symptoms

1. Asking about Pain and Symptoms

Vocabulary

- Dull
- Stabbing
- Sharp
- Aching
- Aggravating factors
- Alleviating factors

Useful Expressions

Study and practice these useful expression.



LOCATION

- Where do you feel it?
- Does it move around?
- Show me where.

QUALITY AND CHARACTER

- What is it like? Is it sharp, dull, stabbing, aching?
- Do you feel.....?
- What does the pain look like?
- When did it last?

SEVERITY

- On a scale 0 to 10, with ten the worst, how would you rate what you feel right now?
- What was the worst it has been?
- Does this interfere your usual activities? In what ways?

TIMING

- When did you first notice it?
- How long does it last?
- How often does it happen?



SETTING

- Does it occur in a particular place or under certain circumstances?
- Have you taken anything for it?
- Does it appear in a particular time?

ACTIVITY 1

1. *Make a complete conversation to explore the dimensions of symptom.*
2. *Take one case only.*

Case 1

A patient with anorexia nervosa expresses:

- I don't want to have a lot of meal.
- I don't want to be plump.
- My arms and legs are getting fat.
- I have difficulty in bowel motion.
- I feel nausea.
- I want to vomit.
- Food makes my stomach upset.
- I am afraid of being fat.



Suggestion

Find details about anorexia nervosa.

Case 2

A patient suspected with appendicitis expresses:

- I feel pain around my navel.
- I feel pain around here (in the lower right spot of my abdomen).
- I feel a sharp pain.
- Don't touch my stomach, it increases my pain.
- I feel feverish.
- I feel nausea.
- I vomit.
- I lose appetite.
- I vomit frequently after meals.



Suggestion

Find details about appendicitis.

2. Reading and Writing

a) Reading comprehension

- *Read the text.*
- *Use the information in the text to complete the sentences in b).*

Pain is important because it tells us that we are injured or ill. However, we don't all feel pain in the same way. Researchers are trying to learn more about this fact. Their experiments show that children are more sensitive to pain than adults, and that men can tolerate more pain than women.

Pain is also difficult to measure and describe. This is a problem because it is an important symptom and medics (medical staff) need information from patients about it. It is therefore common practice to give patients lists of words and ask them to say which words best describe three things: the type of pain they are suffering, its intensity (how bad it is) and its frequency (how often they feel it).

Continue...

With some patients, such as children, words don't work very well to describe intensity, so medics use smiley faces or sometimes colours. For example, blues mean a mild pain and reds mean severe pain. Some medics prefer a range of numbers; 0 is no pain and 10 is unbearable pain.

Pain does not always show where an injury is. Internal organs, for example, do not have many pain receiving nerve endings, so internal injuries often cause pain in a different part of the body. This is called 'referred pain'. One example of referred pain is when someone suffering a heart attack feels pain in their left shoulder, arm or hand.

1. Researchers are trying to find out why _____
a people experience pain differently.
b people feel pain.
c pain is important to people.
- 2 Experiments show that _____
a pain is worse for men than women.
b men can take more pain than women.
c children feel less pain than adults.
- 3 Nurses need to measure a patient's pain because _____
a pain is a problem.
b pain is a symptom.
c patients can't describe it.
- 4 Medics ask patients for a number to describe _____
a the kind of pain they have.
b how bad the pain is.
c how often they're in pain.
- 5 To describe pain, medics ask children to _____
a point to a smiley face.
b think of some numbers.
c say how it feels.
- 6 You experience referred pain _____
a only in your internal organs.
b long after an injury.
c in a different place from an injury.



b) Writing A Report

- *Read the example of pain and symptom reports, then practice writing the similar reports.*

Example of Pain Report

At 18.30 last night the patient complained of a constant shooting pain in his right leg. The pain ranged from moderate to severe. At 08.30 today he says that the type of pain has not changed but it is now occasional. However, when it comes it is much worse. The patient says he is in agony.

Example of Symptom Report

The victim was a 60-year-old man. Two days ago he complained of a bad cough and said he felt nauseous. Yesterday his ankles and feet were swollen and he told his wife that his fingers were numb. At two o'clock in the afternoon he felt dizzy, fell over and lost consciousness. He died of heart failure in the ambulance.

- *Use the information in the box to write a similar pain report about a patient with appendicitis, Mrs. Fawza Adnan.*

Patient's name: Mrs. Fawza Adnan				
Time	Location of Pain	Pain Frequency	Pain Intensity	Pain Type
19.00	Upper abdomen	Occasional	Mild to moderate	Sharp
09.45	Lower right abdomen	Constant	Moderate to severe	Stabbing

- Use the notes in the box to write a similar report about a patient with symptoms of an angina attack.

Patient's	: 55-year-old woman
Admitted to hospital	: Monday 13th June 18.35
Presenting symptoms:	burning pain in the centre of chest, nausea, numbness in fingers
Diagnosis	: angina attack
Treatment	: rest & glyceryl trinitrate
Follow-up	: Tuesday 11.00 : No symptoms, vital signs normal 14.00: Discharged



Source: Pinterest

4

Patient Positioning

Nursing Note 1

Correct positioning of patients is essential for maintaining proper alignment. Many patients need assistance with repositioning due to injury, disease, helplessness or therapeutic devices. Change the position of the patient at least every two hours. Obtain help to prevent injury to yourself and the patient. There are three basic positions for the patient: supine, side-lying, and prone. There are also variations of each position and many other positions (such as dorsal recumbent position, knee chest) depending on what kind of intervention, procedures, examination or therapeutic treatment the nurse will do for the patient.

Nursing Note 2

Basically, changing position accomplishes four things: (1) it provides comfort; (2) it relieves pressure on bony prominences and other parts; (3) it helps preventing the contractures, deformities and respiratory problems and (4) it improves circulation. It is essential to know how to correctly support and position the patient while maintaining good body mechanics for both of you.

Vocabulary

- alignment
- accomplish
- sideways
- lean
- up-right
- downwards
- forward
- elevate
- lower
- decubitus
- tummy



Useful Expression

TASK 1. Basic Instructions

Study these expressions.

Lie flat on your back



Up-right bed position



- Roll over onto your tummy
- Lie on your face
- Lie flat with face downwards

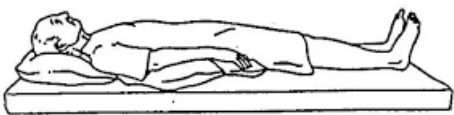


- Roll over into side-lying
- Roll over onto side



TASK 1. Patient Positioning

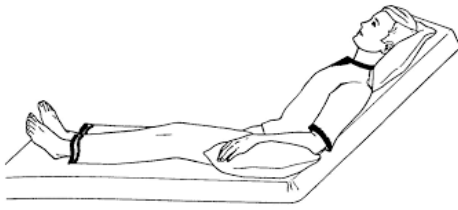
Study these expressions.



SUPINE

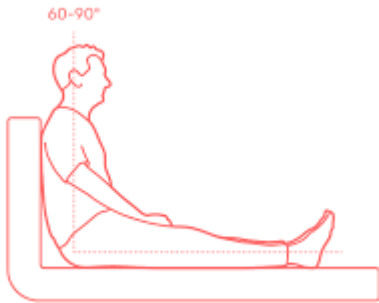
- Now, lie flat in....(supine position)
- I need to put/ place (this pillow/ blanket/ towel) under your..

Continue...



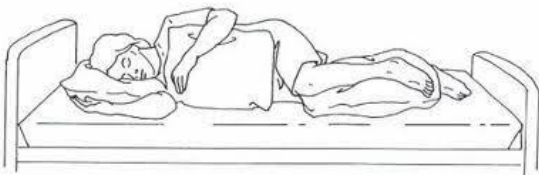
SEMI-FOWLER'S POSITION

(with head of bed 30°-60°) Now, I want/ need to elevate/ lower the head of your bed



FOWLER'S POSITION

(with head of bed 60°-90°) Now, I want/ need to elevate/ lower the head of your bed (to make you more comfortable)



SIDE LYING/SIDEWAYS

- Now, I want you to..... into side lying
- Would you...
- I need to help you...
change your position
roll yourself

SIM'S POSITION

Patient in complete side-lying position, but move further to the far side of the bed. Partially roll patient forward partly on abdomen.



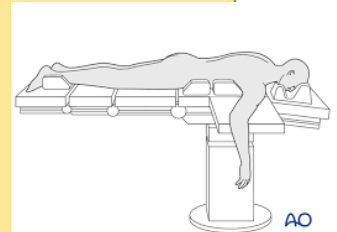
Just extend your left knee
Now I need to put/place this
(pillow) under your left knee

PRONE POSITION

I need to help you...
Let me help you...
I want you to...

change your position with face downwards
change your position to lie on your tummy.

I will put place this (pillow) under your stomach
Just extend your right elbow
Place your left hand under your hip
That's fine



5

Checking Vital Signs

Vocabulary

- Pulse rate
- Rhythm or regularity
- Tension
- Beats per minute
- Patient's chart
- Normal pulse rhythm
- Bradycardia
- Tachycardia
- Bounding
- Thread/weak



Medical Terms	Colloquial expression
Dyspnea	<i>Breathlessness, out of breath, short of breath, fighting for breath</i>
Expectorate	<i>To bring up/cough up phlegm/spit</i>
Expiration	<i>Breathing out</i>
Inspiration	<i>Breathing in</i>
Respiration	<i>Breathing</i>
Sputum	<i>Phlegm</i>



Useful Expressions

Study these expressions to initiate a procedure

TASK 1. Explaining the Procedures

It's time for me ...
I just want ...
I would like ...
I am going ...

to measure your blood pressure to count your pulse
to check your respiration
to measure your temperature
to put this cuff (around your upper arm)
to insert this (thermometer) into your armpit
to put this (thermometer) into your mouth

TASK 2. Giving Instructions and Expressions during Implementation

Would you ...
Would you mind *) please
Now, I want you to...



lie down on the couch
lie flat on the bed
roll your sleeve up
give me your right/left hand
raise your arm
take a deep breath
breathe in ... breathe out
roll yourself into side lying position

*) change the following verb
into V-ing form



TASK 3. Nurse Response

OK, fine. That's it
Fine/good
All is done
Finished

Pair Work

- The illustration below show the implementation of checking vital signs
- Choose one picture then, make a conversation exchange and give appropriate instructions when you want to check patient's vital signs according to the illustration
- Take only one kind implementation of vital signs checking



Picture 1



Picture 2



Picture 3



Picture 4

6

Medication

Get ready!

A Before you read the passage, talk about these questions.

1. What are some common medications that people take?
2. What are the benefits and disadvantages of medication?



Reading

B Read the list of data from Yorkshire Hospital. Then, complete the table using information from the passage.

YORKSHIRE HOSPITAL

Review today's list of patients and their medications. Administer the drugs at the stated times and check each patient off the list.

Administered

- ☐ Jack Singer, Room 100:
Antidepressant (175mg) daily at 9 am
- ☐ Seth Banks, Room 103:
One dose of **painkillers** (120 mg) at 11 am
- ☐ Frank Cline, Room 101:
Sedative (25mg) at 9 pm
- ☐ Kate Ford, Room 114:
Anti-inflammatory (125mg) twice a day at 8 am and 4 pm
- ☐ Tim Hunt, Room 102:
Stimulants (75mg) at 3 pm daily
- ☐ Ted Hurts, Room 118:
Two doses of **antihistamines** (250mg) at 10 am and 6 pm
- ☐ Erica Neil, Room 120:
Antibiotics (200mg) daily at 7 am
- ☐ Ed Parson, Room 105:
Laxative (50mg) in the form of a **suppository** at 11 am

Complete the table using information from passage in the previous page

Name	Medication and Dose	Time
Frank Cline		
	Antihistamines (250mg)	
		9 pm

Vocabulary

Match the words (1-5) with the definitions (A-E)

1. ____ sedative
2. ____ anti-inflammatory
3. ____ dose
4. ____ laxative
5. ____ antidepressant

- A. A drug that puts a person to sleep or calms the person.
- B. a specific amount of a medicine
- C. A drug that lifts a person's mood
- D. A drug that reduces redness and swelling
- E. A drug that helps ease bowel movement

Choose the best answer for the questions.

1. What does a stimulant do?
 - a. it reduces swelling.
 - b. it makes a person alert.
2. Are you familiar with antihistamines?
 - a. Yes, they combat allergy symptoms.
 - b. Yes, they help ease bowel movement.
3. What is suppository?
 - a. It puts a person to sleep or calms the person.
 - b. Medication that is administered through the rectum.
4. Can you tell me about antibiotics?
 - a. They lift up a person's mood.
 - b. They destroy harmful bacteria.
5. When Should I administer painkillers?
 - a. When you are trying to reduce physical pain.
 - b. When you are trying to make a person alert.



Reading Comprehension

There are some plants that can ease pain and cure illness. For thousands of years, they have been the basis of medical treatment. In the 19th century scientific discoveries improved our understanding of the natural world, including our knowledge of medicine. Important discoveries in chemistry meant that scientists could produce synthetic medicines in laboratories.

Most synthetic drugs are very similar to the medicinal parts of plants. One example is the opioid group. To make opioids like morphine and codeine, scientists use part of real opium poppies. Other opioids, like methadone, are synthetic – they are man-made copies of the natural drug.

Synthetic medicines have been very successful, although they can have bad side effects, and sometimes cause patient dependence. Anaesthetics, vaccines, antibiotics and contraceptives have had a huge effect on our lives. At the same time, they have made a lot of money for drug companies.

Drugs normally have two names, a general name and a brand name. For example, the drug with the general name Paracetamol is sold under the brand names Panadol, Calpol and Anadin. Some drugs are available to buy over the counter (in a shop or pharmacy). Other, usually more powerful drugs, are only available with prescription from a doctor. Drug companies are always working to develop new drugs, but also on new ways to administer them. One of the most recent ways to deliver a drug is the transdermal patch, which releases minute quantities of the drug through the skin of the patient.

Decide whether sentences 1–6 are true (T) or false (F) according to the text.

- 1 The natural world changed in the 19th century. _____
- 2 Medicines became scientific in the 19th century. _____
- 3 Medicinal plants are completely different from synthetic drugs. _____
- 4 Methadone is taken from opium poppies. _____
- 5 Panadol, Calpol and Anadin are the same thing. _____
- 6 The transdermal patch is a new way to deliver drugs. _____



SOURCES

- 1) Pamudya, Leo A. (2005). *English for Professional Nurses 1: based on fundamental nursing skills and procedures*. EPN consultant. Jakarta
- 2) Pamudya, Leo A. (2005). *English for Professional Nurses 2: based on fundamental nursing skills and procedures*. EPN consultant. Jakarta
- 3) Grice, Tony (2011). *Oxford English for careers Nursing 1 Practice File*. United Kingdom: Oxford University Press
- 4) Marie and Ros Wright. 2008. *Good Practice: Communication Skills in English for the Medical Practitioner*. Cambridge University Press. Cambridge



This page is intentionally left blank



**STIKES
WIDYAGAMA
HUSADA**
