

1 Health and illness

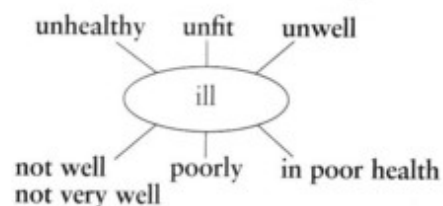
A Asking about health

Health is the state of the body. When doctors want to know about a patient's usual health, they ask questions such as:

What is your **general health** like?

How's your health, generally?

If you are **in good health**, you are **well** and have no **illness** (disease). If you are **healthy** you are normally well and can resist illness. If you are **fit**, you are well and strong.



B Sickness

Sickness has a similar meaning to illness. It is also used in the names of a few specific diseases, for example **sleeping sickness** and **travel sickness**. Patients also talk about sickness when they mean nausea and vomiting.

Patient says	Possible meanings
I was sick this morning.	I was ill this morning. I felt unwell this morning. I vomited this morning.
I feel sick.	I feel ill. I feel unwell. I am nauseous. I feel the need to vomit.

The combination **sickness and diarrhoea** means vomiting and diarrhoea.

C Recovery

When patients return to normal health after illness, they have **recovered**. We can also say:

The patient	made a	good full complete	recovery.
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If a patient's health is in the process of returning to normal, the patient is **improving**. The opposite is **deteriorating**. We can also say that the patient's condition **improved** or **deteriorated**.

In speech, we often use the verb **get** to talk about change:

get	over (an illness)	= to recover
	better	= to improve
	worse	= to deteriorate

If a patient is better, but then gets worse again, the patient has **relapsed**. Another word for **improvement**, especially in recurring conditions such as cancer, is **remission**.

He **got over** the illness very quickly.

Two years later she remains **in complete remission**.

- 1.1 Complete the table with words from A and B opposite. The first one has been done for you.

Noun	Adjective
fitness	fit
health	
illness	
sickness	

- 1.2 Make word combinations using a word from each box. Look at B and C opposite to help you.

complete feel get poor travel	sickness health remission sick over
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- 1.3 Complete the conversation. Look at B opposite to help you.

Doctor: How are you feeling today?

Patient: Not very (1)

Doctor: How long have you been feeling (2) ?

Patient: About a week.

Doctor: What is your (3) like normally?

Patient: Very good. I'm usually quite (4) and (5)

Doctor: What is the problem now?

Patient: It's my stomach.

Doctor: Do you feel (6) ?

Patient: Yes.

Doctor: Have you actually been (7) ?

Patient: No.

Doctor: Have you had any serious (8) in the past?

Patient: No, none at all.

- 1.4 Choose the correct word to complete each sentence. Look at B and C opposite to help you.

1 Her condition (deteriorated/improved) and she died.

2 He (relapsed/recovered) and was allowed to go home from hospital.

3 The cause of sleeping (illness/sickness) was discovered in 1901.

4 The patient made a full (remission/recovery).

5 I have been in (poor/good) health for months and feel very fit.

6 It was a month before I (got over / got better) the illness.

7 He seems to be rather (unhealthy/unwell) – his diet is bad and he never exercises.



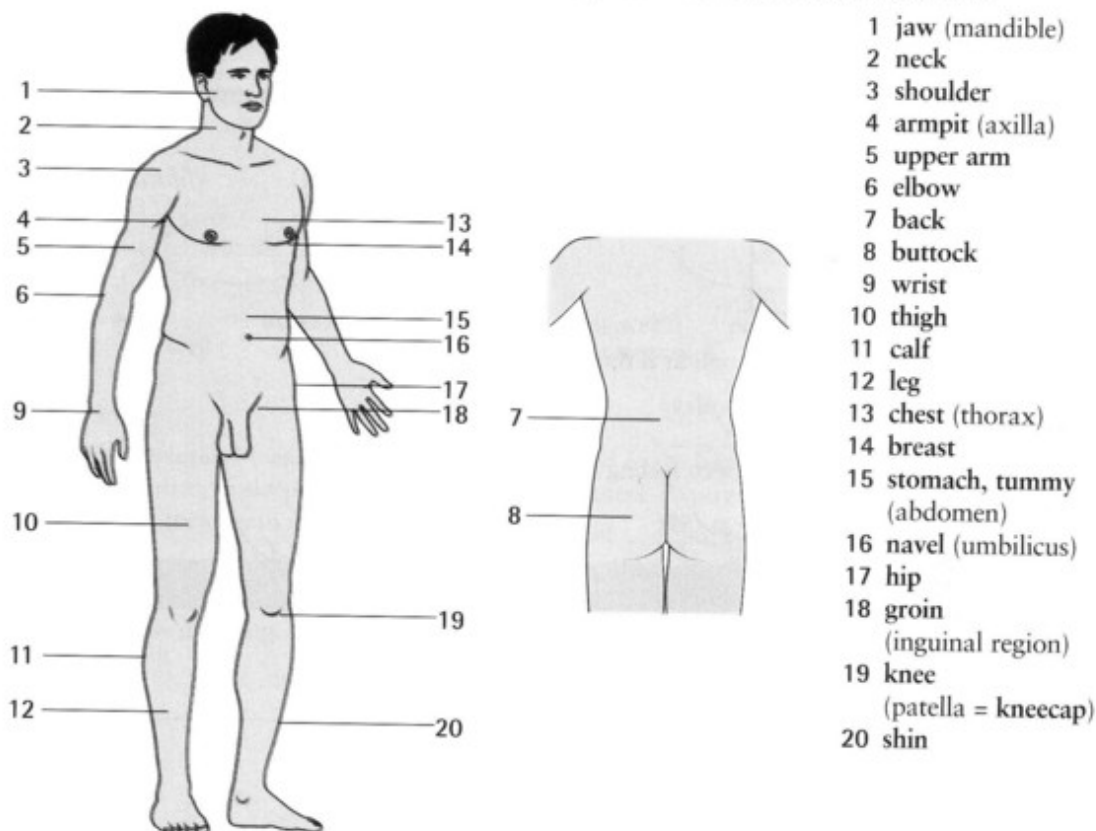
Over to you

What advice do you give people for keeping fit and well?

2 Parts of the body 1

A Parts of the body

Most external parts of the body have ordinary English names as well as anatomical names. Doctors normally use the English names, even when talking to each other. There are a few exceptions where doctors use the anatomical name; these are shown in brackets below.



Limb means arm (**upper limb**) or leg (**lower limb**). The **trunk** is the body excluding the head and limbs.

For a more detailed diagram showing parts of the body, see Appendix I on page 00.

B Referring to parts of the body

When patients speak about their problem they often refer to a part of the body:

I'm having trouble with my hip, shoulder, knee.

The doctor often needs to ask about a part of the body:

Do you get any pain in the your chest? stomach? back?

C Describing radiation of pain

A patient is telling the doctor about his back pain and the parts of the body it radiates to.

It starts in the back. Then it seems to go into the right buttock and down the back of the right thigh to the knee.

- 2.1 Write the ordinary English words for the corresponding anatomical terms in the table using your medical knowledge. Look at A opposite to help you.

Anatomical term	Common word
abdomen	
axilla	
carpus	
coxa	
cubitus	
mamma	
nates	
patella	

- 2.2 Complete the sentences using ordinary English words. Look at A and C opposite to help you.

a A male patient describing angina pectoris:

It's like a tightness across my (1)....., and it goes up
(2)..... my (3)..... and into my left
(4)..... and (5)..... the left (6).....

b A male patient describing renal colic:

It starts (1)..... the loin and goes into the
(2)..... and (3)..... into the testicle.

- 2.3 Complete the sentences. Look at A opposite to help you.

Anatomical term	Patient's statement
1 inguinal swelling	I've got a lump in the
2 abdominal pain	My little boy's got a ache.
3 periumbilical rash	I've got some spots around my
4 thoracic pain	I've got a pain in the middle of the
5 enlarged axillary node	There's a painful swelling in my
6 mandibular pain	I've got a pain in my

- 2.4 Complete the table with words from the box. The first one has been done for you.

abdomen	elbow	loin	wrist	thigh
knee	chest	arm	leg	finger

Trunk	Upper limb	Lower limb
abdomen		

Over to you

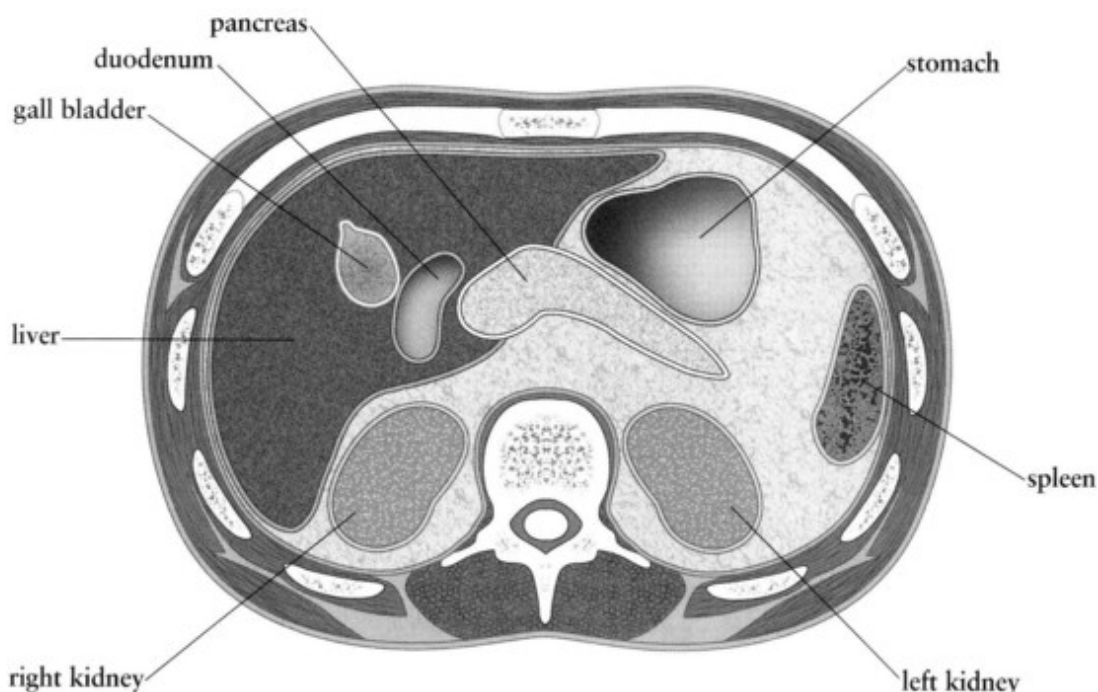


Make a list of the words from A opposite that you find it hard to remember or that you need most often. Try to learn at least one of them every day.

3 Parts of the body 2

A The abdomen

The main **organs** of the body have ordinary English names and doctors use these words. But when an adjective is needed they often use an anatomical word. For example, we can say **disease of the liver** or **hepatic disease**. Some abdominal organs, for example the pancreas, have no ordinary name.



When doctors talk about the main parts of the digestive system, they use the words **bowel** or **intestine**: the **small intestine** or the **small bowel**, the **large intestine** or the **large bowel**. When speaking to patients, doctors may refer to the anus and rectum as the **back passage**.

B The chest

The chest (thorax) contains the organs of respiration and the **heart**. The main parts of the respiratory system are the **airways** and the **lungs**. The left lung is divided into two **lobes**, and the right into three. The airways consist of the larynx, the trachea (or **windpipe**), the right and left bronchus, and the **bronchioles**. The chest is separated from the abdomen by the **diaphragm**.

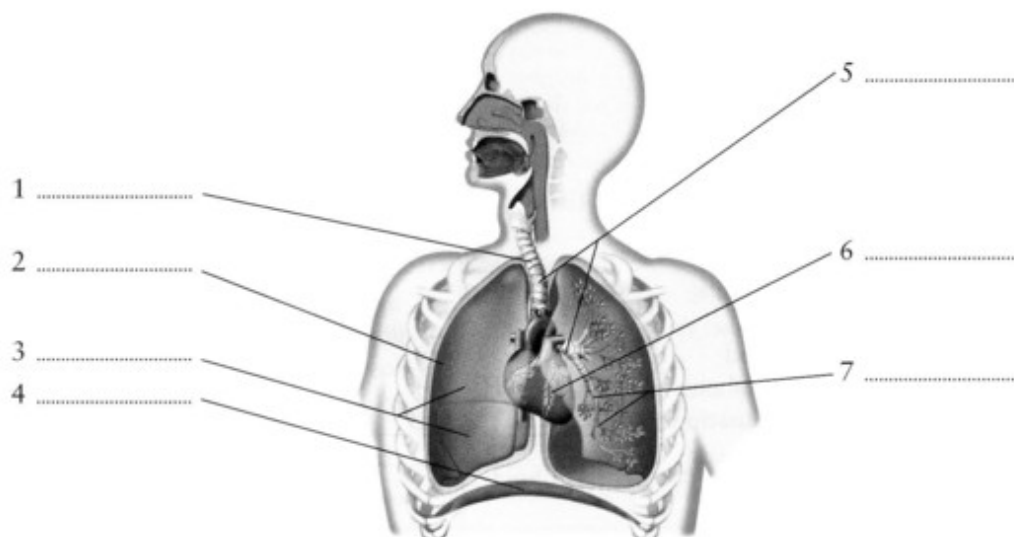
C The pelvis

A doctor is explaining the function of the **bladder** to a patient.

The bladder is situated in the pelvis, as you know, and it is connected to each **kidney** by a long tube called the **ureter** – one on each side. The ureters carry the urine from the kidneys to the bladder, where it is stored until you decide to **empty your bladder**. When that happens, the urine passes down another tube, called the **urethra**, to the outside.

3.1 Label the diagram using words from the box. Look at B opposite to help you.

diaphragm	lobes	windpipe	heart
lung	airways	bronchioles	



3.2 Match the conditions (1–8) with the organs affected (a–h), using your medical knowledge.

1 hepatitis	a bladder
2 pneumonia	b gall bladder
3 nephritis	c heart
4 gastric ulcer	d kidney
5 cystitis	e liver
6 angina pectoris	f lung
7 cholecystitis	g stomach
8 ulcerative colitis	h large bowel

3.3 Complete the textbook extract. Look at A and C opposite to help you.

Examination of the abdomen

To examine the patient for enlarged abdominal (1), first feel for the (2) and the (3) on the right side. To do this, ask the patient to take a deep breath, while pressing with the fingers upwards and inwards. Next, feel for the right (4) and then cross over to the other side for the left (5) Still on the left side, palpate for an enlarged (6) Finally, moving to the lower abdomen, feel for the (8) which is only felt if it is full.

Over to you

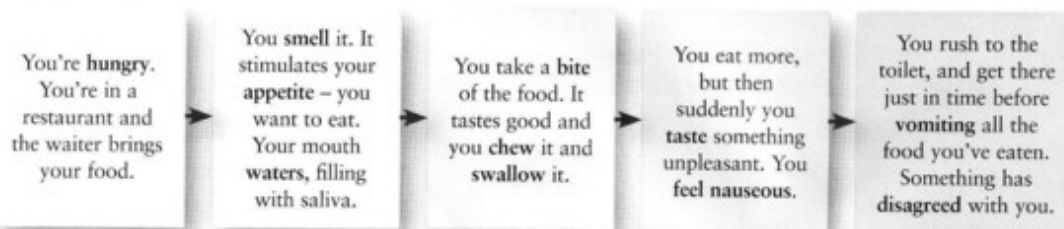


Many patients do not know the location or function of the spleen or the pancreas. How would you explain them to a patient, in English?

4

Functions of the body

A Eating



B The five senses

In addition to **smell** and **taste**, the senses include **sight** (or vision), **hearing**, and **touch** (also called **sensation** or **feeling**). To ask about the senses, doctors use the questions:

What is your	sight hearing	like?
Is your	sense of smell sense of taste	normal?

To ask about the sense of touch, doctors talk about **numbness** (loss of sensation):

Have you noticed any numbness (in your fingers or toes)?

C Other functions

Function	Verb	Noun
speaking	speak	speech
walking	walk	gait
breathing respiration	inhale / breathe in / take a breath in exhale / breathe out	breath
urination micturition	urinate micturate pass urine / pass water	urine
defecation	defecate pass faeces / pass stools	faeces stools
menstruation	menstruate have a period	(menstrual) period (monthly) period

When taking a history, doctors can ask:

Do you have any	trouble difficulty problems	walking? breathing? passing urine? with your speech?
	pain	when you breathe in?

When auscultating a patient's lungs, the doctor tells the patient:

Take a deep breath in, hold your breath, then breathe out completely.

D Less common functions

There are some things we do less often. When we are hot, we **sweat**. When we are nervous, we **shake**. When we are sad, we **cry**.

Doctors can ask:

Do you	sweat shake	more than usual?
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4.1 Match the symptoms (1–5) to the questions (a–e), using your medical knowledge.

- | | |
|-------------|--|
| 1 dysuria | a What is your breathing like? |
| 2 dysphagia | b Do you have any pain when you pass water? |
| 3 diplopia | c Do you have any difficulty with your speech? |
| 4 dysphasia | d Do you have any trouble swallowing? |
| 5 dyspnoea | e Is your vision normal? |

4.2 Patients are describing symptoms of the conditions shown in brackets. Complete the sentences. Look at C and D opposite to help you.

- 1 I've got pain and in both feet. (peripheral neuropathy)
- 2 I'm having difficulty solid food. (oesophageal stricture)
- 3 I have a lot of problems (prostatic hypertrophy)
- 4 I've been more than usual, even when it's not hot. (hyperthyroidism)
- 5 I've noticed that my hands when I'm not using them. (Parkinsonism)
- 6 I have trouble when I climb the stairs. (left heart failure)

4.3 Complete the sentences. Look at A, B, C and D opposite to help you.

- 1 When I eat solid food, I have to (bite/chew) it for a long time before I can (swallow/eat) it.
- 2 Do you have any pain when you (pass/have) stools?
- 3 I have no (taste/appetite) and I've lost five kilos in the last few weeks.
- 4 When did you last (have/pass) a period?
- 5 The garden is full of flowers, but my (sense/sensation) of smell has disappeared and I can't enjoy the perfume.
- 6 Take a deep (breathe/breath) in.

Over to you



You think a patient may have diabetes. Think of five questions you can ask the patient to investigate further. Try to use the question types presented in this unit.

5 Medical practitioners 1

A Practitioners

In Britain, doctors, also known as **medical practitioners**, must be **qualified**: have a university degree in medicine. They must also be **registered** – included in the General Medical Council's list, or **register** – in order to **practise** (see Unit 13). A doctor who treats patients, as opposed to one who only does research, is called a **clinician**. A doctor who provides primary care for patients is known as a **general practitioner (GP)**, or family doctor. GPs usually work in a **group practice**. Larger group practices work in a building called a **health centre**.

Note: In British English, the verb is spelt **practise** and the noun is spelt **practice**.

B Specialties

Specialist doctors, for example paediatricians, generally work in hospitals. However, those who work outside the NHS, providing **private health care**, may have **consulting rooms** outside a hospital – for example in the famous Harley Street in London.

The two main branches of medicine are **surgery** and **internal medicine**, and the doctors who practise these branches are called **surgeons** and **physicians**, respectively. In Britain, male surgeons are addressed as Mr and females as Ms – so Dr Smith is a physician, and Ms Smith is a surgeon.

A cardiologist	specializes in is a specialist in	diseases of the heart and circulation, or cardiology .
A geriatrician		diseases of elderly patients, or geriatrics .
An anaesthetist		anaesthetics .

Note: Names of specialties usually end in **-ology**; names of specialists usually end in **-ologist**. If the name of a specialty ends in **-ics**, the name of the specialist ends in **-ician**. There are some exceptions, e.g. **anaesthetics** and **anaesthetist**.

C Choosing a specialty

Jill Mathews has just graduated from medical school and is talking about her future.

'I haven't decided what to **specialize in** yet. I need more experience before I decide, but I'm quite attracted to the idea of paediatrics because I like **working with** children. I'd certainly prefer to work with children than, say, elderly patients – so I don't fancy geriatrics. I was never very **interested in** detailed anatomy, so the **surgical specialties** like **neurosurgery** don't really appeal. You have to be **good with** your hands, which I don't think is a problem for me – I've **assisted at** operations several times, and I've even done some minor ops by myself – but surgeons have to be able to do the same thing again and again without getting bored, like tying off cut arteries and so on. I don't think that would be a problem for me, but they need to make decisions fast and I'm not too **good at** that. I like to have time to think, which means surgery's probably not right for me.'

Note: The collocation **good with** is followed by a noun – *He's good with children*. The collocation **good at** is followed by the -ing form (gerund) of a verb, or by a noun – *She's good at explaining procedures. She's good at explanations*.



- 5.1 Write sentences to describe the work of the specialist in each branch of medicine. Look at B opposite to help you.

- 1 dermatology
- 2 rheumatology
- 3 traumatology
- 4 paediatrics
- 5 obstetrics

A dermatologist specializes in diseases of the skin.

- 5.2 Complete the table with words from A, B and C opposite and related forms. Put a stress mark in front of the stressed syllable in each word. The first one has been done for you.

Verb	Noun (person)	Noun (activity or thing)
'specialize		
practise		
consult		
assist		
graduate		
qualify		

- 5.3 Find prepositions in C opposite that can be used to make word combinations with the words in the box. Then use the correct forms of the words to complete the sentences.

good interested specialize work

- 1 A pathologist diagnosing disease through examining cells and tissue.
- 2 A paediatrician must enjoy children.
- 3 An oncologist is the diagnosis and treatment of cancer.
- 4 A psychiatrist must be counselling.
- 5 A neurosurgeon must be her hands.

- 5.4 Make word combinations using a word from each box. Two words can be used twice. Look at A, B and C opposite to help you.

consulting
general
group
health
internal
surgical

centre
practice
specialties
medicine
practitioner
rooms

Over to you



Re-read what Dr Jill Mathews says about surgeons in Section C. Make a list of the qualities she thinks are needed to be a good surgeon. Then make a similar list of qualities for another specialty.

If you are a student, which branch of medicine do you think you have the qualities for? If you have already completed your training, why did you choose your particular branch of medicine?

6

Medical practitioners 2

A Hospital staff

The people who work in any type of workplace, including hospitals, are called the **staff**. The **medical staff** in a British hospital belong to one of four main groups:

- A **pre-registration house officer (PRHO)**, or **house officer**, is a newly graduated doctor in the first year of postgraduate **training**. After a year, he or she becomes a registered medical practitioner. In the current system of training, the **Foundation Programme**, the name for these junior doctors is **Foundation Year 1 doctor (FY1)**. (See Unit 12)
- A **senior house officer (SHO)** is in the second year of postgraduate training. The title is now **Foundation Year 2 doctor (FY2)**, but the old terms senior house officer and SHO are still used.
- A **specialist registrar (SpR)** is a doctor who has completed the Foundation Programme, and is training in one of the medical specialties. There are also some **non-training registrars** – doctors who have completed their training but do not wish to specialize yet.
- A **consultant** is a fully qualified specialist. There may also be some **associate specialists** – senior doctors who do not wish to become consultants. In addition, there is at least one **medical (or clinical) director**, who is responsible for all of the medical staff.

B Medical teams

Consultant physicians and surgeons are responsible for a specific number of patients in the hospital. Each consultant has a **team** of junior doctors to help care for those patients. In many hospitals, there are **multidisciplinary teams** which consist not only of doctors but also of physiotherapists and other allied health professionals (see Unit 8).

When patients enter – or **are admitted to** – hospital, they are usually seen first by one of the junior doctors on the **ward** where they will receive treatment and care. The junior doctor **clerks them** – **takes their medical history** (see Units 47–49) – and examines them. Some time later, the registrar also sees the patients, and may order **investigations** or **tests**, for example X-rays or an ECG, make a provisional **diagnosis**, and begin treatment. The consultant usually sees the **new admissions** – people who have recently been admitted to the ward – for the first time on one of the regular **ward rounds**, when the management of the patients is discussed with the registrar. Consultants also decide when a patient is ready to be **discharged** (sent home). On the ward round, the consultant is accompanied by the team and a nurse, and they visit all the patients in the consultant's care.

C Shifts

Junior doctors now normally work in **shifts**, which means they normally work for eight hours every day, for example 7 am to 3 pm, and are then free until 7 am the next day. After a week they change to a different shift, for example 3 pm to 11 pm or 11 pm to 7 am. The alternative system is to work from 9 am to 5 pm every day and to take turns to be **on call** – available to return to the hospital if necessary – from 5 pm to 9 am the next day. Days on call are set out in a **rota**, or list of names and times. Doctors on call carry a **radio pager**, or **beeper**, a device which makes a noise when someone is trying to contact them.

- 6.1 Make word combinations using a word from each box. Look at A, B and C opposite to help you.

associate house on provisional radio ward	call diagnosis officer pager round specialist
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- 6.2 Match the descriptions (1–5) with the job titles (a–e). Look at A and B opposite to help you.

- 1 Dr Graham has been a paediatrician for eight years and is responsible for treating the children admitted to Ward 60.
- 2 Dr Stewart has just started the second year of her Foundation Programme.
- 3 Dr Singh has started his training as a surgeon.
- 4 Dr Phillips has just graduated and is working in a large hospital in Birmingham.
- 5 Dr Millar is in charge of the medical staff in the Birmingham hospital.

- a specialist registrar
- b medical director
- c consultant
- d SHO
- e PRHO or house officer

- 6.3 Are the following statements true or false? Find reasons for your answers in A, B and C opposite.

- 1 A medical graduate becomes registered two years after graduation.
- 2 The system of training doctors in Britain is called the Foundation Programme.
- 3 The name senior house officer is no longer used in Britain.
- 4 The consultant is usually the first doctor to see new patients.
- 5 When working in shifts, all doctors take turns to be on call.

- 6.4 Complete the text of a PRHO describing her job. Look at A, B and C opposite to help you.

When I get to the ward, the first thing I do is talk to the house officer who was on duty during the last (1) , to find out if there have been any new (2) Then I generally see the charge nurse. He tells me if there is anything that needs to be done urgently, such as intravenous lines to put up or take down. Later in the morning, I (3) any new patients, which basically involves taking a history. On Tuesday and Friday morning the consultant does her ward (4) , and I have to make sure I'm completely up to date on her patients. After that, there are usually lots of things to do, like writing up request forms for blood (5) , and so on. In the afternoon, I have to prepare for any patients who are to be (6) the next day. They're usually happy to be going home! And then of course there are the lectures and tutorials in the (7) programme on Monday and Wednesday.

Over to you



How does the hospital training of doctors in your country differ from the British system?
How would you explain it to a colleague from another country?

7 Nurses

A Nursing grades

Nurses working in a hospital have the following grades:

student nurse	a nurse who is still in training
staff nurse	a nurse who has completed the training course
charge nurse	a more experienced nurse who is in charge of , or responsible for, a ward or department
nurse manager	a nurse who is in charge of several wards

Note: The old term **sister** is still sometimes used for a female charge nurse. A female nurse manager may be called **matron**.

Dr James is talking to Sister Watkins.

B Support workers

The **clinical support worker**, who has done a short course and obtained basic qualifications, and the **nursing auxiliary**, who is usually unqualified, both assist nursing staff. There may also be **ward clerks**, whose duties include making sure patients' notes and information are up to date, and answering the telephone.

C Specialization

Like doctors, nurses can specialize:

- A **midwife** has specialized from the beginning by doing a course in midwifery, the management of pregnancy and childbirth.
- **District nurses** visit patients in their homes.
- **Health visitors** also work in the community, giving advice on the promotion of health and the prevention of illness.

D The nurse's role

The nurse's role has changed considerably in recent years. In addition to general patient care, checking temperatures, pulse rates and blood pressures, changing dressings, giving injections and removing sutures, nurses now do some of the things previously reserved for doctors, such as prescribing drugs, and ordering laboratory tests. More responsibility for nurses is planned, as the following article demonstrates.

Nurses carry out surgery in effort to cut patient waiting lists

Nurses in Scotland trained to **perform** minor surgery have entered the operating theatre for the first time in an effort to cut patient waiting times. Five nurses who have passed a new course at Glasgow Caledonian University are now qualified to **carry out** such **procedures** as the removal of small lesions, benign moles and cysts.

The Scotsman

The verbs **perform** and **carry out** are used with all types of procedures. They are often used in the passive form.

perform	an examination
carry out	an operation
	a procedure
	an experiment
	a test
	a biopsy

The procedure was performed carried out by a nurse.

7.1 Complete the sentences. Look at A, B and C opposite to help you.

- 1 Someone who specializes in delivering babies is a
- 2 Someone who is qualified to assist nurses is a
- 3 Someone who is not qualified but is able to assist nurses is a
- 4 A nurse who has qualified is a nurse.
- 5 A nurse who specializes in health promotion is a
- 6 A nurse who looks after a ward is a nurse.
- 7 A nurse who works in the community is a nurse.
- 8 Someone who answers the ward telephone is a

7.2 Make word combinations using a word or phrase from each box. Look at D opposite to help you.

carry out
change
check
give
remove

sutures
a procedure
an injection
a dressing
the temperature

7.3 Complete the sentences with the correct grammatical form of *perform*.

- 1 An isotope brain scan is painless and easy
- 2 Biopsy of the pancreas last March.
- 3 If the patient's condition deteriorates, a laparotomy should
- 4 If a diagnosis of meningitis is suspected a lumbar puncture must
- 5 Last year we a randomized, double blind group study.

7.4 Complete the sentences with the correct grammatical form of *carry out*.

- 1 I now intend a larger study.
- 2 Unfortunately few properly controlled trials so far.
- 3 A number of studies recently to look at this question.
- 4 A right hemicolectomy and the patient made a full recovery.
- 5 This procedure can in the emergency department.



Over to you



What kind of tasks do nurses carry out in your country? Are nurses' responsibilities increasing? What are the implications of this?

8 Allied health professionals

A Community health

The health of the community depends on a large number of people other than medical practitioners and nurses. These can be grouped under the heading of **allied health professionals**. They include the following:

- **Physiotherapists (physios)** help people to move by getting them to do exercises or by treating their body with heat or **massage** – treatment by manipulating muscles and joints with the hands. (See Unit 42)
- **Occupational therapists (OTs)** help people with a disability to perform tasks at home and at work. A **disability** is a physical or mental condition that makes it difficult to live normally, for example blindness or deafness.
- **Social workers** help people to solve their social problems – for example poor housing or unemployment – or family problems.
- **Chiropodists**, also known as **podiatrists**, treat conditions affecting the feet.

B Technicians

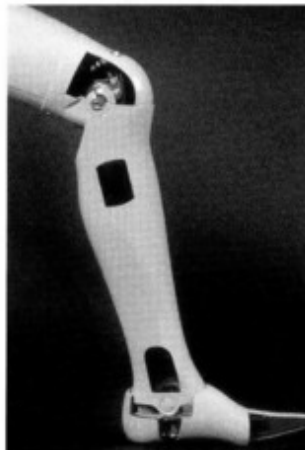
There are numerous **technicians** – people who work with scientific equipment – such as radiographers, who are known as **X-ray technicians**. **Ambulance technicians** work in the emergency medicine service. An ambulance technician with more advanced qualifications is called a **paramedic**.

C Prosthetists and orthotists

Prosthetists and **orthotists** provide care for anyone who needs an **artificial limb**, (a **prosthesis**), or a device to support or control part of the body (an **orthosis**). They also advise on **rehabilitation** – helping patients return to normal life and work after treatment.

Prosthetists provide **artificial replacements** for patients who have had an **amputation** or were born without a limb.

Orthotists provide a range of **splints** and other devices to aid movement, correct **deformity** from an abnormal development of part of the body, for example **club foot** (talipes), and relieve pain.



A prosthesis



Splints

D Opticians

Opticians test **eyesight** and prescribe **glasses** – also known as **spectacles** – and **contact lenses**, when necessary. The examination includes measuring **intraocular pressure** – the pressure of fluid inside the eye – and examining the retina. If the optician suspects an eye disease, such as **glaucoma**, they refer the patient to their GP for treatment. The GP may then refer the patient to an **ophthalmologist**, a doctor who specializes in diseases of the eye.

- 8.1 Make word combinations using a word from each box. Look at A, B, C and D opposite to help you.

ambulance
artificial
club
contact
health
intraocular
occupational
social

foot
lens
limb
worker
pressure
technician
professional
therapist

- 8.2 Which allied health professionals could best help the following people? Look at A, B, C and D opposite to help you.

- 1 a young unmarried woman who has just had a baby
- 2 a woman who is having difficulty using her right arm following a fracture
- 3 someone who needs glasses
- 4 an elderly woman who has had a below knee amputation
- 5 a man whose wife has Alzheimer's disease
- 6 a man with a fungal infection of his feet

- 8.3 Complete the texts. Look at A and C opposite to help you.

A prosthetist works with patients of all ages as a member of a clinical team, based at a large hospital. The patients may need a prosthesis as the result of an accident, or

(1) following a disease such as diabetes. Alternatively they may have been born without a (2) Orthotists work alongside doctors, nurses, physiotherapists and occupational (3) to give the people under their care the best possible (4) Their main aim is to enable the patient to lead a normal life at work and leisure.

An orthotist often works in a clinic as part of an outpatient service and also visits other centres to provide a service for people with special needs. They deal with people of all ages. For instance, children who have cerebral palsy may require (5) to help them walk and many older people need special shoes to correct (6) If damaged, any part of the human skeleton may require some form of orthosis. The orthosis may be needed to reposition the body or to (7) pain.

Over to you



Britain is introducing a new member to the healthcare team, called a medical care practitioner (MCP), similar to the physician assistant in the United States and other countries. The MCP will be able to carry out some of the functions of a medical practitioner, such as history-taking and examination, and diagnosis and treatment of certain illnesses, without having a medical degree. What are the advantages and disadvantages of this in your opinion?

9 Hospitals

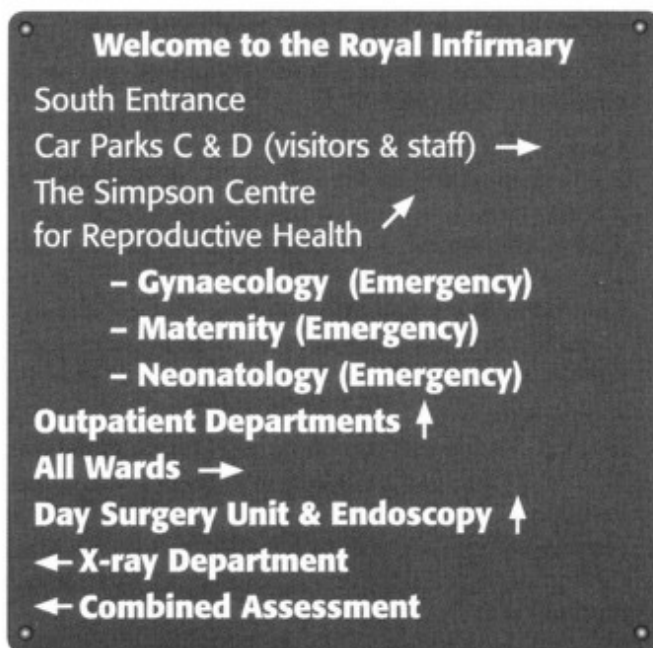
A Introduction to a hospital

Jordi Pons is a fourth-year medical student from Barcelona. He has come to Britain on an elective attachment to the Royal Infirmary, Edinburgh. Dr Barron is introducing him to the hospital.

Dr Barron: The Royal Infirmary is the name of the **university hospital** for Edinburgh University. It is a **general hospital**, dealing with all types of patients and illnesses, except paediatrics. We have a **specialist hospital** for that in another part of Edinburgh, the Hospital for Sick Children. You can see some of the **departments** in our hospital on the sign. Of course, there are many others, for example the **Intensive Care Unit (ICU)**, and the **Surgical High Dependency Unit (HDU)**.

Jordi: What does 'outpatient' mean?

Dr Barron: Outpatients are the people who come to hospital to **attend a clinic** or to **have tests or treatment** and then return home on the same day. **Inpatients** stay in the hospital for one or more days. The rooms where they stay are called **wards**. If a patient's treatment requires only one day, such as a simple operation, they can be admitted to the **day surgery unit**.



B Outpatients

Dr Barron: The **Accident and Emergency Department (A&E)**, also called **Casualty**, is where patients who are **acutely ill** – with a sudden, serious condition – come for assessment and treatment. Outpatients who have an appointment to see a specialist go to a clinic in one of the **Outpatient Departments (OPDs)**. They have usually been **referred** to the hospital by their GP, who writes a **referral letter** to the consultant explaining the patient's problem.

C Inpatients

Dr Barron: The inpatients in a hospital are **admitted** in one of three main ways. They may be seen in one of the outpatient clinics and admitted from there or, if there is a lot of demand for the treatment they need, as in the case of a hip replacement, they are **put on a waiting list** for admission. Alternatively, their GP may arrange the **admission** by telephone because they are acutely ill, for example with suspected myocardial infarction. Or they are seen in the A&E Department, where the doctor **on duty** – working at that time – arranges the admission. This would happen in the case of a patient with a fractured neck of femur, for example. Larger hospitals may have an **assessment unit** where patients can be admitted temporarily while their condition is **assessed**.

Jordi: Assessed?

Dr Barron: Yes – decisions are made about their condition, and what needs to be done to help them. After treatment is completed, the patient is **discharged** back to the GP's care.

- 9.1 Complete the table with words from A, B and C opposite. Put a stress mark in front of the stressed syllable in each word. The first one has been done for you.

Verb	Noun
ad'mit	
assess	
discharge	
operate	
refer	
treat	

- 9.2 Make word combinations using a word from each box. Look at C opposite to help you.

acutely
assessment
on
referral
waiting

unit
letter
list
duty
ill

- 9.3 Which hospital departments would be most appropriate for the following patients? Look at A, B and C opposite to help you.

- 1 a woman in diabetic coma
- 2 a patient who has just had a radical prostatectomy
- 3 a patient who is to have a skin lesion removed
- 4 a man with a foreign body in his eye
- 5 a woman with a threatened abortion

- 9.4 Complete the extract from an information leaflet for patients. Look at A, B and C opposite to help you.

Information for outpatients

When you arrive at the (1), please tell the receptionist who will welcome you, check your details, and direct you to the waiting area. The length of your visit will depend on the (2) you're going to have. You may need to have some (3), such as an X-ray, which could mean going to another (4) Or you may be (5) to other professionals, such as a physiotherapist or dietician. You may need to revisit the clinic. If staff at the clinic want to see you again, another appointment will be arranged for you. If you need to be (6) to hospital for more treatment, either as an inpatient or for (7) surgery, you will be told when this is likely to happen. If you do not need further treatment you will be (8) to your GP's care.

Over to you



How do hospitals in your country organize admissions? How would you explain the procedure to a colleague from another country?

10 Primary care

A The National Health Service

The **National Health Service (NHS)** is responsible for health care for everyone in the UK, although a small number choose to pay for private care. Treatment is free but there is a **prescription charge** for drugs and **appliances**, such as a cervical collar, with exemptions for some patients, such as children and the elderly.

Primary care is provided by **general practitioners**, or **GPs**, (sometimes known as **family doctors**), nurses, dentists, pharmacists and opticians. GPs work in **practices** of 1 to 20. Practices are based in a **surgery** and look after the health of from 1,000 to 15,000 people in their local community. They also provide health education in areas such as smoking and diet, **run clinics**, give vaccinations, for example for influenza, and may **perform minor surgery** such as removal of warts and moles. If a patient needs specialist care, the GP will **make a referral** – refer the patient to a consultant in secondary care.

Patients are normally seen on an **appointment** basis. **Home visits** are made when patients are **housebound** – unable to leave their homes – or too ill to attend surgery. **Out-of-hours (OOH)** treatment, from 6 pm to 8 am, is provided by the local Primary Care Trust, which organizes shifts of GPs and **locum** GPs to cover if someone is absent.

Note: The noun **surgery** has three meanings:

- the building where GPs work – *The practice has moved to a new surgery on the High Street.*
- a time when GPs see patients – *Morning surgery is from 8.30 to 12.30.*
- the work of surgeons – *The patient needs urgent surgery on a burst appendix.*

B The practice team

A typical GP practice employs **receptionists**. They are responsible for initial patient contact, **making appointments**, taking requests for repeat prescriptions, **taking messages** from patients and other health care providers, and for **filing** and **scanning documents** into patient records. The **practice manager** has responsibility for finance and sometimes for IT, **supervises reception staff**, **hires locums**, and helps prepare the practice development plan. **Practice nurses** run asthma, diabetes, and cardiovascular disease clinics as well as **one-to-one** clinics for those who wish to give up smoking.

In addition to practice staff, GPs work with a number of health professionals (see Unit 8):

- **District nurses** visit temporarily housebound patients, such as recently **discharged** hospital patients, to **change dressings**, such as ulcer dressings.
- **Health visitors** visit families to **carry out check-ups** on young children – particularly under-fives – to make sure they're healthy. Special attention is paid to **families in need**, such as those living in poverty. They also do baby immunizations.
- **Midwives** run clinics for antenatal patients.
- **Physiotherapists** provide hands-on treatment but also teach patients exercises they can do to improve their condition after an accident or operation.

C A GP's day

Dr Stuart works in a practice in a small market town with three other family doctors. The surgery is in the centre of the town and is shared by three practices. This is a typical working morning when she is not the **duty doctor**, responsible for emergencies and urgent problems.

8.00 am	arrive at the surgery check the OOH email printout check for urgent and non-urgent messages
8.30 am	check emails from the health board and partners prepare for surgery
8.30 - 10.50 am	morning surgery (ten-minute appointments) 6 pre-booked last week 2 booked 48 hours ahead 4 bookable on the day
10.50 - 10.55 am	check with Reception for messages sign prescriptions and deal with repeat prescription requests
11.00 - 11.20 am	coffee break in the conference room with colleagues
11.20 - 11.30 am	check home visit requests and divide up visits with colleagues
11.30 am - 1.00 pm	home visits

10.1 Complete the sentences. Look at A opposite to help you.

- 1 Children, over-60s, and people with some chronic diseases do not have to pay in the UK.
- 2 Patients with mobility problems may be unable to go out. They are
- 3 The average GP is ten minutes long.
- 4 A is someone who takes the place of a staff member who is on leave.
- 5 Care outside working hours is known as treatment.

10.2 Make word combinations using a word or phrase from each box. One word can be used twice. Look at A and B opposite to help you.

change
make
perform
refer
run
supervise
take

messages
staff
appointments
home visits
dressings
a clinic
a patient
minor surgery

10.3 Which member of a practice team would be responsible for each of the following? Look at B opposite to help you.

- 1 Running a clinic for pregnant women
- 2 Teaching a patient how to strengthen his broken leg
- 3 Letting the GP know that a patient can't come to her appointment
- 4 Running a clinic for people who want to lose weight
- 5 Visiting a patient who has just returned home after a hernia operation
- 6 Carrying out check-ups on children in a poor neighbourhood
- 7 Organizing cover for an absent doctor

10.4 Complete the diary for Dr Stuart's afternoon. Look at A and C opposite to help you.

1.00 - 2.00 pm	practice team meeting over sandwich lunch
2.00 - 4.00 pm	afternoon (1) 12 ten-minute (2)
4.00 - 4.20 pm	coffee break
4.20 - 5.00 pm	check with (3) for messages. Deal with home (4) and repeat (5) requests.
5.00 - 6.00 pm	paper work, e.g. (6) to secondary care, admin tasks, telephone calls to patients, private medical examinations
6.00 pm	phones switched to (7) service.

Over to you



Describe a typical day for a GP in your country or in the country where you work.