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美国医院医患沟通 情景对话精选

(中英对照版) English for Healthcare Professionals

Authored by

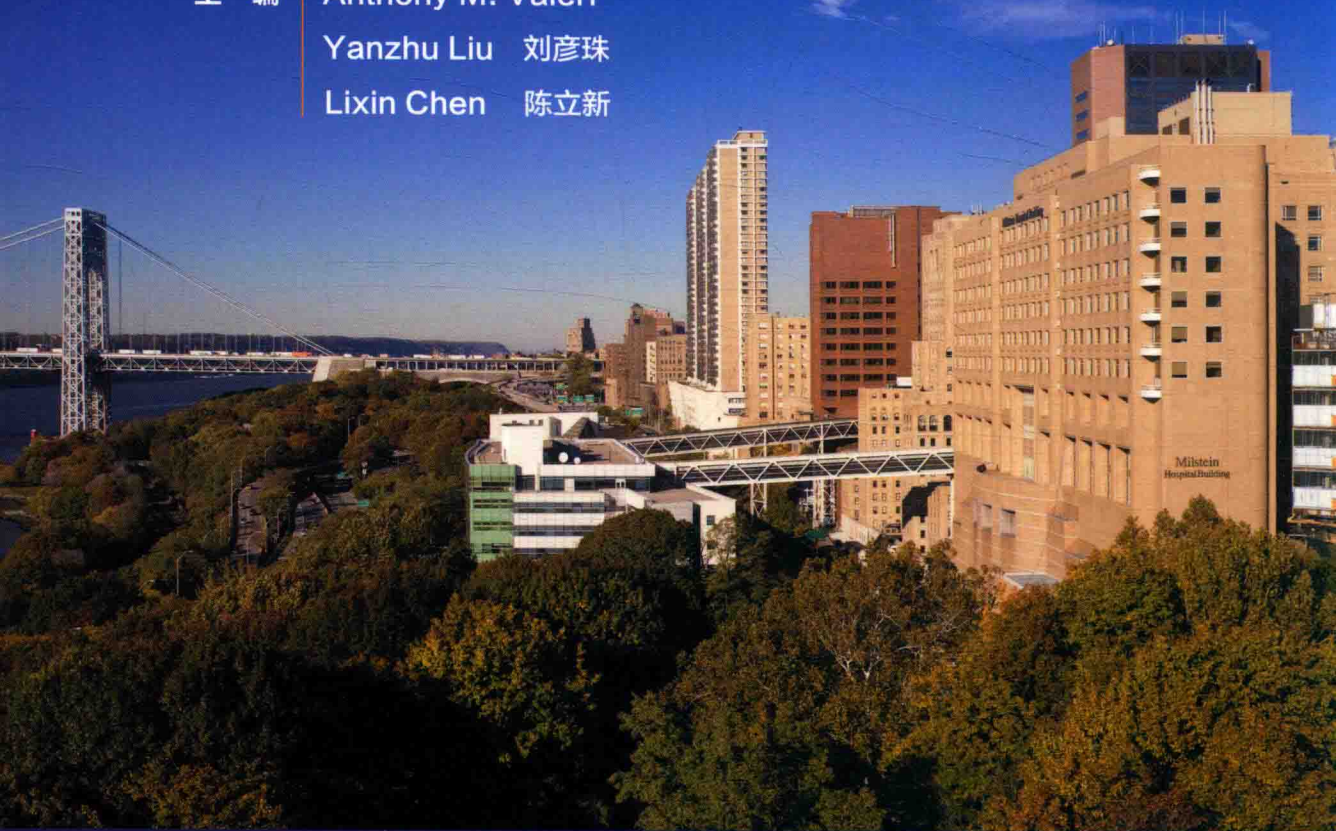
主 编

Kyung-sook Kim

Anthony M. Valeri

Yanzhu Liu 刘彦珠

Lixin Chen 陈立新



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主编 | Kyung-sook Kim
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编委 | Kyung-sook Kim
Anthony M. Valeri
刘彦珠
陈立新
陈心童
朱海燕

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主 编: Kyung-sook Kim Anthony M. Valeri

刘彦珠 陈立新

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Book Reviews by ESL doctors

“I enjoyed reading this fabulous book by Kim. It brought me right to the wards and clinics in US hospitals. With real cases, real settings and real dialogues, the book is very practical and interesting to read. It teaches me just what is needed in US hospitals. As an ESL healthcare professional from China, this book does help me tremendously in adjusting to the US healthcare system, not only language wise but also knowledge and culture wise. Also, I believe it is a perfect supplemental study material for the USMLE CS exam. I am sure you will enjoy reading this book as I do!”

- Weijia Wang, MD, China

“I fell in love with the book as soon as I read Ms.Kim’s first paragraph...as a non-English native speaker, I found *English for Healthcare Professionals* to be wonderful, helpful, and pleasant to read.This friendly book truly reflects what the most important fact is in a clinical encounter: communication with the patient; and it guides the reader with great detail, through the clinical scenario emphasizing the medical vocabulary, and the nature of the dialogue in a given situation.It is undoubtedly a clever, precise, friendly, and complete tool that every non-English native speaker in the process to become a healthcare professional in the U.S.should read.Thanks dear Kim for putting this wonderful book on my way...”

- Angelica Cifuentes, MD, Colombia

3A productive healthcare-provider relationship is built on the foundation of excellent communication. I had the privilege to review Ms. Kim's book, "*English for Healthcare Professionals*", and this book is an important contribution in this area. Ms. Kim draws upon her extensive clinical experience in an academic New York City teaching hospital which takes care of patients from many cultures and who speak many different languages. She has drawn up a list of common clinical encounters where the healthcare provider is taking a history and then providing counseling to a patient. The list of diseases is quite comprehensive and each topic is dealt with in-depth. The body of the discussion is true to life and brings out the medical subtleties of the English language during these encounters. This book is an excellent resource for medical English for practitioners whose first language is not English and will go a long way in building a sound patient-provider relationship.

Jai Radhakrishna, MD, MS, MRCP, FACC, FASN

Professor of Clinical Medicine

Columbia University College of Physicians and Surgeons

Associate Clinical Director and Director of the Nephrology Fellowship Program

New York Presbyterian Hospital

About the Authors

作者简介

Kyung-sook Kim, RN, MSN, CNN, FNP-C

New York Presbyterian Hospital

Gyeong Gi Nursing School, Incheon, Korea

Bloomfield College, BSN, Cum Laude, Bloomfield College

Long Island University, Master of Science in Nursing

Certified Nephrology Nurse

Board Certified Family Nurse Practitioner

Member of American Academy of Nurse Practitioner

Hobby and specialty: playing Piano & Harp, Reading and Writing (Writing “Thank You” letter)

Anthony M. Valeri, MD

NYU-Polytechnic University, BS (major: Life Sciences), 1973, Summa Cum Laude

SUNY- Health Science Center at Brooklyn, MD, 1981, Magna Cum Laude

Residency in Internal Medicine, New York Presbyterian Hospital (Columbia),
1981-1984

Clinical Fellowship in Nephrology, New York Presbyterian Hospital (Columbia),
1984-1986

Assistant Professor of Clinical Medicine, NY University -Bellevue, 1986-1991

Professor of Clinical Medicine, Columbia University College of Physician and Surgeons,
New York Presbyterian Hospital (Columbia), 1991-Present

Medical Director, Hemodialysis, New York Presbyterian Hospital (Columbia),
1991-Present

Physician of the Year Awardee, New York Presbyterian Hospital (Columbia), 2001

Hobby: Reading and sightseeing

Yanzhu Liu

刘彦珠

**M.D.(China), M.S., OMD., Ph.D, L.Ac., Dipl.Ac., Dipl.C.H., Herbologist:
C.H(NCCAOM)**

Born in 1965, Dr.Liu received his M.D.and Ph.D.from Beijing University of Chinese Medicine in 1996, finished his first postdoctoral training in Tsinghua University in 1998, and came to Columbia University as Associate Research Scientist in 1999 for hyperlipidemia(high fat/lipid concentration in the blood) and atherosclerosis (disease of the arteries) .

Dr.Liu is currently serving as the CEO of Acupuncture Corporation of America (ACA) .

For a long time, Dr.Liu has been working in the fields of clinical medicine, education, scientific research, and hospital administration of TCM and integrative medicine.

He is a professor of Traditional Chinese Medicine at Pacific College of Oriental Medicine, NYC.He has been active in researching atherosclerosis for 13 years.Dr.Liu is also a member of American Heart Association, member of Beijing Science and Technology Society, P.R.China, and member of Chinese Medicine and Pharmacy, P.R.China.

He has been in charge of three National Natural Science Fund projects, 1995 “invigorating spleen to remove phlegm and blood stasis” clinical researcher for treating hyperlipidemia have the honor to win the National Natural Science Foundation of China; 1999 “Heat-clearing and detoxifying drug on vascular smooth muscle cell proliferation, cell cycle”, won the National Natural Science Foundation of China; 1999 “The study of TCM syndrome of primary hyperlipidemia and the effect of invigorating spleen to remove phlegm and blood stasis on HSPG regulation of atherosclerosis” was supported by the National Natural Science Foundation of China.

A patent of China, 1998 “Drug for treating atherosclerotic” got the patent of China.

And in 1995, “‘ Fu Dou’ mixture for the treatment of bradycardia research” has the honor to get the third prize by the State Administration of Traditional Chinese Medicine.

He has written chapters for 5 books and published more than 16 academic papers as the chief editor of Internal Medicine—Chinese Medicine and has published 20 papers related to his clinical and biomedical research.

Lixin Chen**陈立新****M.D., Ph.D., EMBA**

Born in 1964, Dr. Chen received his M.D. and Ph.D. in Chinese Medicine and Cardiology in Integrative Medicine from Hebei University of Chinese Medicine (HUCM) in 1986 and Beijing University of Chinese Medicine (BUCM) in 1992, and EMBA from China Europe International Business School (CEIBS) in 2006.

Dr. Chen is a professor, chief physician of Cardiology in Integrative Medicine, and supervisor of doctoral candidates at BUCM, a strategy researcher of School of Humanities at Tsinghua University (THU); an executive director at Chinese Association of Integrated Medicine (CAIM), and etc. He is currently serving as the deputy secretary-general at World Federation of Chinese Medicine Societies (WFCMS) with the main responsibilities of international certification for Chinese Medicine professional qualification, evidence-based medicine study, international health tourism and medical cooperation, and international trade in services on Chinese medicine.

Previously, Dr. Chen served as the director of emergency department, director of medical administration department, and the vice president at Dongzhimen Hospital affiliated to BUCM, the co-president at Traditional Chinese Medicine (TCM) Clinic Bad Kötzing in Germany, the president at Beijing Royal Integrative Medicine Hospital; the president at Yan Huang Dong Fang (Beijing) Healthcare Technology Co., Ltd.; and etc.

For decades, Dr. Chen has been working in various different fields, including clinical medicine, education, scientific research, and hospital administration of TCM and integrative medicine. He has been in charge of three National Natural Science Fund projects, one "Creating Major New Drugs" Major Special "Eleventh Five-Year" Plan of the Ministry of Science and Technology project, one Science Foundation for the Excellent Youth Scholars of the Ministry of Education project, one Outstanding Young Talents Special Fund of the Ministry of Health project, and two State Administration of Traditional Chinese Medicine projects. He has published more than thirty academic papers, and received two natural science awards for his research projects from the BUCM, the "Beijing Higher Education (Youth) Academic Leader" title, the "Excellent Hospital Administrator" title, and etc. Moreover, he has been very involved in the international medical profession for years. Besides 3 years of working at the TCM Clinic Bad Kötzing in Germany, he also worked as a short-term medical advisor in Switzerland, the chief examiner overseas for TCM examination at the Department of Health in Hong Kong SAR for 3 continuous years, and a clerkship preceptor for the Master of Healthcare Administration (MHA) of School of Public Health at University of Minnesota Twin Cities Campus (UMTC) in the United States.

序

第一次看到这本书，是在美国开会期间拜访在纽约工作的同门刘彦珠博士，他曾在中国清华大学和美国哥伦比亚大学做博士后研究，他向我推荐这本书。我多年在北京的一家医院从事临床工作和医院管理工作，也曾在美国从事医疗、医院管理，特别是就职世界中医药学会联合会这个国际学术组织以来，一直希望能够有一本书告诉我们中国的医学生和医务人员，在国外医生如何与患者交流？而这本书正好满足了我的这个愿望。

原书由长期在美国纽约长老会医院（New York Presbyterian Hospital）工作的 Kyung-Sook Kim 女士编写，Anthony M. Valeri 博士编辑。经刘博士牵线搭桥，Kim 女士欣然同意在人民卫生出版社出版发行，由刘博士和我担任编译。本书共 49 个病种，涉及临床各科常见疾病，每个疾病先有病例介绍，紧接着是医生与患者的对话，内容丰富，场景真实，简明实用，并全文配有标准的美音朗读，融医学专业英语与日常口语交流为一体，非常适合有志于出国留学的医学生，以及开展英语查房或涉外医疗的医院医务人员学习使用，是一本难得的现代医学英语中英对照读本。

为更好地适应中国医学生及医务人员的学习习惯，我们邀请美国德雷塞尔大学健康管理专业学士、香港大学公共卫生专业硕士陈心童女士对本书重点单词和英文缩写进行了筛选和整理，并逐词注解；同时邀请北京中医药大学第一附属医院中西医结合心血管病专业博士、副主任医师朱海燕女士为本书中英文对照进行了细致校对。她们的工作使本书更加适合中国医学生及医务人员研读、记忆并应用。

在本书即将付梓之时，恰好我去英国伦敦参加学术会议，住在著名的海德公园旁边，又恰逢“国际儿童图书日”（International Children's Book Day）。我忽然异想天开地想到，对于以中文为母语的学习者，学习难度较大的医学英语似应仿孩童初学，朗朗习诵，熟记

于心，脱口而出。而此刻站在前贤驻足激辩的英伦圣地，也不禁感慨以熟练英语交流所学、沟通医患之重要。希望本书能够为有志之士的成功助一臂之力！

谨此，遵临行前出版社的嘱托，聊以为抒，文以为序。

陈立新

医学博士，管理学硕士

中西医结合内科教授、主任医师

世界中医药学会联合会副秘书长

2017年4月2日于英国伦敦

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1. Allergic Rhinitis



CC: “I have a runny nose and my eyes are itching.”

Rona is a 55 y/o Caucasian female who presented with a runny nose, itching, tearing eyes and sneezing for 3 days. Her symptoms got worse after she went out for her doctor’s appointment. She immigrated to the United States from Spain when she was 25 years old with her family and she developed allergies 7 years later for the first time. Her allergy symptoms included severe itching in her eyes and constant sneezing at that time.

The itching in her eyes was so severe that she thought she would scratch her eyeballs out. She went to her PCD and took some medications he prescribed, but she felt only temporarily relief. She felt much better with a change of weather.

Her allergic symptoms have recurred every spring thereafter. Her doctor performed allergy skin tests and found that she is allergic to pollen. She wanted to stay home because of her history, but she had to go to see her doctor for her chronic back pain.

In addition to these symptoms, she also c/o headache, sore throat, mild periorbital puffiness along with a clear nasal discharge.

She denied fever, chills or SOB (shortness of breath). She was diagnosed with hypertension 6 years ago and she is on HCTZ (hydrochlorothiazide) and quinapril.

She lives in a private house with her husband. She was a teacher’s aide but she retired early to help take care of her grandchildren.

Dialogue

Doctor: Hi, Rona. What brings you in today?

Rona: I have a runny nose and my eyes are itching very badly.

Doctor: When did you first notice these symptoms?

Rona: I have had them for about 3 days, but it is like I am having it every spring.

Doctor: Do you have any other symptoms?

Rona: I sneeze too, but the itching is really driving me nuts. I am afraid I might scratch out my eyeballs.

Doctor: You said it happens every spring?

Rona: Yes, according to my doctor, I am allergic to pollen so my allergy symptoms get worse during springtime always. This time, my symptom started after I went out to see my doctor because of my back pain.

Doctor: Do you have nasal stuffiness?

Rona: No, but I think I have a little swelling around my eyes.

Doctor: Have you ever received any treatment for your symptoms in the past?

Rona: Yes, actually, my allergies developed about 7 years after I came to this country. I saw a doctor at that time and he prescribed some medication, but I felt better for only a few days with the medication. When the weather gets warmer, I feel better.

Doctor: What is the color and amount of your nasal discharge?

Rona: It is clear, but it is running constantly.

Doctor: Is there any changes in your hearing or sense of smell?

Rona: No, I think my hearing and smell are fine.

Doctor: Do you have a sensation of needing to constantly clear your throat?

Rona: No, I am O. K. My major problems are runny nose and severe itching in my eyes.

Doctor: Do you have headache or a sore throat?

Rona: Yes, both sometimes.

Doctor: Any of your family members with the same problem?

Rona: One of my sisters has the same allergy problem like me after we moved to the States.

Doctor: Let me examine you. I think your allergic rhinitis has recurred this spring. In your case, avoidance of the allergen is the most effective form of treatment. I will prescribe a steroid nasal spray to help reduce the inflammation which will help alleviate your symptoms. If that doesn't help, we could try a series desensitization shots. I would refer you to an allergy specialist for that.

2. Angina Pectoris



CC: “I get tightness in my chest.”

Sarah is a 65 year old Caucasian female who presented with chest pain and tightness while gardening earlier today. She described her pain as pressure, squeezing, burning and tightness in the chest. Her pain started behind the breast bone and radiated up to her neck. This pain occurred when she was working in her garden in the middle of the day after she had a heavy lunch.

The pain lasted for 5-10 minutes then resolved when she rested inside her home. Her chest pain was graded 6-7 out of 10. This pain was accompanied by SOB (shortness of breath) but no sweating, nausea or vomiting. She did not attempt any other measure to relieve her pain but rest.

She describes no other associated symptoms during this episode of pain such as dizziness or palpitations. Sarah initially thought she had indigestion, but she has decided to seek medical attention when a second episode of pain occurred 3 hours ago. At the clinic, she had another episode of chest pain and tightness and was given NTG (nitroglycerin) 0.4 mg sublingually.

Her pain resolved within 5 minutes after the administration of SL (sublingual) NTG. She had been diagnosed with DM (diabetes mellitus) 15 years ago and HTN (hypertension) 10 years ago.

She stated that her cholesterol is high but she does not know how high it is. She does not have any GI (gastrointestinal) problem history in the past. Sarah's father passed away at the age of 52 due to a heart attack and her mother has had diabetes for over 20 years.

Dialogue

Doctor: Sarah, how do you feel today?

Sarah: I feel horrible. I have tightness in my chest and I am a little bit scared of my symptoms.

Doctor: When and how did it happen?

Sarah: I was working in my garden all morning and afternoon. I felt chest pain and tightness after I had large meal because I was starving. It happened while I was gardening to plant some new flowers.

Doctor: How long does it last?

Sarah: I think it lasted roughly for about 5-10 minutes.

Doctor: What did you do to relieve your chest pain? Did you rest?

Sarah: Yes, I went into my house and sat in a chair for a while until the pain went away.

Doctor: How strong was your pain? If you use a scale of 1-10, 1 as the mildest and 10 as the strongest pain you can imagine. How would you grade your pain?

Sarah: I guess my pain was 6 or 7 out of 10. It was hurting a lot.

Doctor: Did you have any other symptoms such as shortness of breath, sweating, nausea, or vomiting along with the chest pain?

Sarah: I had SOB, but I did not have any other of the symptoms you mentioned. Actually, I initially thought I had indigestion because I just had a big meal, but the chest pain came back 3 hours ago and I have decided to check with you.

Doctor: Does anyone in your family have heart problems, diabetes or hypertension?

Sarah: Yes, my father passed away from a heart attack and my mom has diabetes.

Doctor: Sarah, You have several risk factors for developing heart disease, your diabetes, high blood pressure, age, and your family history. Let's investigate your symptoms further to prevent your chest pain episodes in the future. I want to get some blood work (CBC, BUN/creatinine, Troponin, CPK, HbA1c, ESR/CRP, Lipid panel) and an EKG today. I will give you a prescription for aspirin and for * NTG to take if you get another episode of the same pain. You can take up to 3 pills, 1 every 5 minutes, if the pain doesn't go away; call 911 immediately to take you to the nearest ER (Emergency Room). Otherwise we'll plan for a stress test and echocardiogram to evaluate for the presence and severity of coronary artery disease and to evaluate left ventricular function. Based on those results, we would begin aspirin, beta-blockers and statin therapy. Cardiac catheterization may be indicated based on the severity and extent of the coronary artery disease suggested by the stress test and echocardiogram.

* NTG: Nitroglycerin