

大学英语阅读教程

COLLEGE ENGLISH READING

MEDICAL AND NURSING 医护类

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主 编: 徐慧娟 赵 越

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大学英语的类数程

COLLEGE ENGLISH READING

MEDICAL AND NURSING 医护类



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《大学英语阅读教程(医护类)》是依据最新教学理念,遵循语言学习内 在规律,采用全新的素材编写而成的阅读教程。

《大学英语阅读教程(医护类)》以提高学生阅读医护英语相关材料的能力、拓展和深化学生对该学科基本知识的认知、培养具备国际竞争力的技术人才为目的,针对应用型本科院校的生源特点、培养目标和办学特色,本着先进、实用的选材原则和简明、系统的组织原则,为各高校医护类专业学生提供一个提高英语水平和专业素养的平台。在打好语言基础、提高英语水平、培养综合应用能力的总体目标下,使学生在基础英语学习的同时接触医护英语,达到EGP和ESP的融合,顺利完成从基础英语向专业英语的过渡。

本教程共两册,分别适用于本专科一、二年级大学英语教学。每册八个单元,每单元由三篇难度逐级递增的阅读文章组成,旨在给学生提供更多的语言"输入",促进其对相关语言的"输出"。文章选材来源于美国之音及国际权威网站发布的文字资料,兼顾了权威性、实用性和趣味性。各单元内容自成一体,涉及医学的发展、保健、急救、护理、康复等综合性材料,也有感冒、心肺、肠胃、心脑血管、代谢性疾病、虫媒传染病及精神病等题材。

本教程每篇文章的长度为500-800词,文后生词中除四级词汇外,还包括医护专业术语,旨在训练学生阅读理解能力的同时丰富其词汇量。每篇文章之前配有课前问题讨论(Pre-reading Questions),以激发学生的阅读兴趣,同时对文章的主要内容和文化背景有初步了解,促进后续阅读学习。

本教程每篇文章之后均配有相关练习,第一篇和第二篇配有理解 (Comprehension)和词汇(Vocabulary)类别的多种练习形式,第三篇配有理解 (Comprehension)和总结(Summary)两部分。理解(Comprehension)部分涉及的练习形式有判断正误题、简短回答题和多项选择题,从多角度考察学

生对文章的理解;词汇(Vocabulary)部分涉及的练习形式有英英配对连线题和填空题,分别考察学生对文章中出现的医护专门术语和四级词汇的掌握;总结(Summary)部分则考察考生对文章的整体把握和归纳能力。在每单元最后,还配有医院环境或人体不同部位的图片,以扩大学生医护方面的词汇量,为其进入专业英语学习打下良好的基础。

本教程是学生从普通英语向医护专业英语过渡的衔接读物,既可作为高校医护专业的阅读教材,也可作为医护工作人员的补充读物。目的是帮助医护专业学生及医护工作人员了解行业知识,提高阅读能力。

《大学英语阅读教程(医护类)》由山东协和学院多位资深的英语专家携手医护专业的专家共同编写而成。山东协和学院以医护为特色,该校的护理学实验教学中心被评为国家级实验教学示范中心。

本教程力求完成《大学英语课程教学要求》所赋予的任务,在多门英语基础课中扮演 好自己的角色。由于编者水平有限,疏漏在所难免,在此,我们恳请各界同仁、广大读者不吝 赐教。

> 本书编写组 2015年3月30日

Contents

UNIT 1	Medical Development Passage 1 Medical Terms Passage 2 Need a Doctor? Turn on Your Electronic Device Passage 3 Discovery of Penicillin Learning More		2 6 10 14
UNIT 2	Sleep and Health		
	Passage 1 People Sleeping Less Risking Serious Health Problems Passage 2 Taking an iPhone to Bed Prevents Children Sleeping Passage 3 Researchers Link Gene to Need for Less Sleep Learning More		16 21 25 28
UNIT 3	Sports and Health		4 /
	Passage 1 Mindfulness Helps Teens Cope with Stress and Anxiety Passage 2 Exercise Is a Huge Protector for Your Heart Passage 3 Need a Brain Boost? Learning More		32 37 41 44
UNIT 4	Diet and Health	***************************************	***********
	Passage 1 Dietary Changes Help Lower Blood Pressure Passage 2 Ten Reasons to Eat a Healthy Balanced Diet Passage 3 Healthy Diet—Getting Started Learning More		48 53 57 60
UNIT 5	Health Care		
	Passage 1 Fitness Truths: Realistic Goal Setting Passage 2 Fruits May Protect Children from Leukemia Passage 3 Sleeping in Contact Lenses May Cause Ocular Infection Learning More	1	64 69 73 77

UNIT 6	First Aid		
	Passage 1	History of First Aid	80
	Passage 2	First Aid Kit	85
	Passage 3	Key Skills During First Aid	89
	Learning M	ore	93
UNIT 7	Nursing		***************
	Passage 1	The Lady with the Lamp	96
	0	Nursing—A Thriving Profession	101
	Passage 3	Types of Nurses in the US	104
	Learning M		107
UNIT 8	Rehabilitation	on	
	Passage 1	When Is Rehabilitation Necessary?	110
	0	New Approach with Elderly Addicts at Nursing Home	115
	Passage 3	Disability System for Veterans Strays Far from Its Official Purpo	se 119
	Learning M	ore	122
Key to Ex	xercises		123





Passage 1 Medical Terms

Passage 2 Need a Doctor? Turn on Your Electronic Device

Passage 3 Discovery of Penicillin



Passage 1

Pre-reading Questions:

- 1. Do you think it's important to use medical terms in our daily life? Why?
- 2. How many medical terms do you know?

Medical Terms

Many professions have their own words and expressions. This is true for the medical profession. Medical terms allow healthcare professionals to communicate precisely and effectively. Just like a foreign language, medical terminology has its own vocabulary and ways of stringing together words. It's also very specific: each disease has its own name and classification, as every part of our body does. Doctors can use a medical term that encompasses everything that they need to communicate. If doctors could not use medical terms to describe a set of symptoms or a condition, they would need to use a list of descriptive words to try to explain a patient's condition. For example, when doctors want something done during surgery, they can tell the rest of the surgical team exactly what to do in very specific terms by giving their orders in medical terminology.

Doctors use many technical terms that most people do not understand, but there are also some expressions we use every day to tell about a person's health. Let me explain.

Last month, I was under the weather. I thought I had caught a cold. I had a runny nose, itchy eyes, a sore throat and a cough. I felt tired and run down. I was in poor condition because I had not got enough rest. My body hurt all over. I also had severe head pains—a real splitting headache. And I was running a fever. My body temperature was higher than normal.

At one point, I blacked out. I lost consciousness and my friend had to bring me around. He used cold water on my face to restore my consciousness. I grew concerned that I might take a turn for the worse. I did not want to become sicker because then surely I would be at death's door.

My friend took me to the doctor. I told the doctor I thought I had come down with a cold. When the doctor saw me, she immediately wanted to run some tests on me. She said that medical tests would help her discover why I was sick. The doctor also asked

when I had my last physical. I did not get yearly check-ups, but I probably should get a medical exam by a doctor every year. Then the nurse drew my blood. She used a needle to take a small amount of blood from my arm, and sent it to a laboratory for tests. The nurse also used a thermometer to measure my body temperature.

The doctor told me I had influenza. But she also said I would recover soon. She said I was over the worst of the disease. She told me to rest at home and to stay away from other people because the flu can spread. It is contagious. Thankfully, I did not have to go under the knife. Instead, I did just as the doctor ordered. I went home, took some medicine and did exactly what was needed to become healthy again. Soon, I was on the mend. I was pulling through and recovering from my sickness.

Now, I am back on my feet. I am physically healthy again. Even better, the doctor has given me a clean bill of health. She says that I am 100 percent cured. I am back to normal and I feel great. My friends say that I now look like the picture of health.

(564 words)

New Words and Expressions

healthcare ['helθ,keə] n. 医疗保健 specific [spə'sɪfɪk] adj. 特定的 classification [ˌklæsɪfɪ'keɪʃn] n. 分类 encompass [ɪn'kʌmpəs] vt. 包含 symptom ['sɪmptəm] n. 症状 surgery ['sɜːdʒəri] n. 外科手术 surgical ['sɜːdʒɪkl] adj. 外科手术的 under the weather 身体不适 itchy ['ɪtʃi] adj. 发痒的 sore [sɔː] adj. 疼痛的 splitting ['splɪtɪŋ] adj. 剧烈的 black out 昏过去; 暂时失去知觉

bring around 恢复意识
consciousness ['kɒnʃəsnəs] n. 知觉
physical ['fɪzɪkl] n. 体格检查
needle ['niːdl] n. 针头
thermometer [θə'mɒmɪtə] n. 体温计
influenza [ˌɪmflu'enzə] n. 流行性感冒(简写flu)
contagious [kən'teɪdʒəs] adj. 传染性的
go under the knife 接受手术
on the mend 正在康复
pull through 从疾病中挺过来
back on one' feet 恢复健康
cure [kjuə] vt.& vi. 治愈

Exercises

Comprehension of the Passage

- I. Decide whether the following statements are True (T), False (F) or Not Given (NG).
- ☐ 1. Medical terms help medical professionals communicate effectively.



	2.	Without medical terms, doctors would need to use a list of descriptive words to explain the patients' condition.		
	3.	The author went to see a doctor right after he/she was not feeling well.		
	4.	The doctor ran some tests and discovered why the author was sick.		
	5.	The author had an operation and was cured.		
II. Answer the following questions according to the passage.				
	1.	Why is it necessary for doctors to use medical terms?		
	2.	What are the author's symptoms of catching a cold?		
	3.	When did the author grow concerned about the fact that he/she might take a turn for the worse?		
	4.	What did the doctor decide to do when she saw the author?		
	5.	What should we do when we have a flu according to the passage?		
III.	III. There are some questions or unfinished statements below. Choose the best an from the four choices marked A, B, C and D for each of them.			
	1.	What is the importance of using medical terms for doctors?		
		A. It's convenient for doctors to name various diseases and their classification.		
		B. Doctors can use medical terms that encompass everything they need to communicate.		
		C. Doctors use many technical terms so that most people do not understand.		
		D. Doctors cannot talk about a person's health without medical terms.		
	2.	Which of the following conditions is NOT the author's symptom when he/she wasn't feeling well?		
		A. He/She had a runny nose, itchy eyes, a sore throat and a cough.		
		B. He/She felt tired and run down.		
		C. His/Her body hurt all over.		
		D. His/Her body temperature was normal.		

What did the au	thor go through before the doctor discovered why he/she was sick?
A. A simple che	eck-up.
B. A few quest	ions asked by the doctor.
C. Blood test.	
D. All the above	re.
4. If you want to r	ecover from a flu, you should NOT
A. rest at home	
B. take the mee	dicine from the doctor
C. take part in	a party
D. accept the d	octor's advice
5. The last sente	nce "I now look like the picture of health" has all the following
meanings EXCl	EPT "".
A. I was on the	mend
B. I was 100 pe	ercent cured
C. I was back t	o normal
D. I was pullin	g through and recovering from my sickness
Vocabulary	
I. Match the words	or phrases in Column A with the explanations in Column B.
Column A	Column B
1. sore	A. services offered by the health profession
2. thermometer	B. a sign of the illness
3. needle	C. treating disease or injury by operative procedures
4. surgery	D. an acute disease which is highly contagious
5. healthcare	E. having a strong desire to scratch
6. cure	F. hurting
7. influenza	G. to make healthy again
8. physical	H. a very thin and pointed hollow metal rod for medical purpose
9. itchy	I. a measuring instrument for measuring temperature

J. a health check-up

10. symptom



II. Fill in the gaps with words and phrases given in the box. Change the form where necessary. Each word or phrase can be used only once.

1

specific	classification	encompass	surgical	splitting		
normal	consciousness	black out	bring around	on the mend		
back on one's feet	cure	pull through	go under the knife			
1. In his case, a simple operation is needed.						
2. The baby had been sick but seemed						
3. She never recovered						
4. Peter hates his r	nose so much th	nat he's conside	eringto	have it made		
smaller.						
5. Her temperature soon returned to						
6. An operation finally his brain injury.						
7. Our counsel decided that given all the facts, we were correct in our original						
of these contractor	ors.					
8. My head is from the noise.						
9. I could feel blood in my face. I wondered whether I was about to						
10. The course will physics, chemistry and biology.						

Passage 2

Pre-reading Questions:

- 1. How often do you use electronic device in your daily life?
- 2. Do you think it is possible to use electronic device to solve our healthy problems? Why?

Need a Doctor? Turn on Your Electronic Device

Caring at a distance is an old practice which was often conducted via post. There has been a long and successful history of the long distance healthcare which, thanks

to modern communication technology, has evolved into what we know as modern telemedicine.

Telemedicine is the name for when doctors give advice to patients by telephone or the Internet, or when patients in rural areas connect with specialists in big cities. Starting out over 40 years ago with demonstrations of hospitals extending care to patients in remote areas, the use of telemedicine has spread rapidly and is now becoming integrated into the ongoing operations of hospitals, home health agencies, private physician offices as well as consumers' homes and workplaces.

But the rise of smartphones, tablets and webcam-equipped computers is raising telemedicine to new levels. Some health care systems in the United States now offer Virtual Urgent Care, with which patients see a doctor by video chat without having to leave home.

Diana Rae is a nurse educator in the western state of Washington. She recently demonstrated how Virtual Urgent Care works with Doctor Ben Green in Seattle. She used an iPad tablet and Skype—a video chat service.

"Hi, yes, my name is Doctor Ben Green, among the doctors with Franciscan[®] Virtual Urgent Care."

Doctor Green had the patient describe her symptoms, and then he performed a physical exam by demonstrating what he wanted her to do. Doctor Green decided that the problem was a silent infection. For medicine, he prescribed an antibiotic. He said about three out four patients have health problems that can be treated like this—through Virtual Urgent Care, which means a video chat could replace a visit to the doctor's office.

"Patients' safety is really important to us. So if we feel like the patient is not safe to be treated in this manner, we're going to suggest other alternatives for him/her," Green said.

The Franciscan Health System is based in Tacoma, Washington. Franciscan charges \$35 for this kind of virtual house call, much less than the cost of going to an emergency room, a doctor's office or an urgent care clinic.

After trying the video conference, Diana Rae said she would be happy to pay the \$35, when she was recently home with a bad cold. "I would have paid twice that for the convenience of getting care without having to sit in a waiting room, wait, and get exposed to everyone else's germs," Rae said.

Franciscan operates hospitals, clinics and a hospice for end-of-life care. Franciscan has a deal with a company called Carena to add Virtual Urgent Care by Skype or



phone. Carena is one of several companies doing this kind of work around the country. But a company official says state rules have not kept progress with developments in telemedicine because of the safety problem.

Telemedicine is a significant and rapidly growing component of healthcare in the United States. Over half of all US hospitals now use some form of telemedicine. The workers who provide Virtual Urgent Care must be separately licensed in each state where the company does business. For now, that means Carena doctors can treat patients in Washington state and California for example, but not in neighboring Oregon or Idaho. Around the world, millions of patients use telemedicine to monitor their vital signs and remain healthy out of hospitals and emergency rooms. Consumers and physicians download health and wellness applications for use on their cell phones.

(578 words)

New Words and Expressions

evolve into 发展成
demonstration [,demən'streɪʃn] n. 示范
integrate into 融入
physician [fɪ'zɪʃn] n. 内科医生
silent ['saɪlənt] adj. 轻度的
infection [ɪn'fekʃn] n. 感染

prescribe [prɪ'skraɪb] vt.& vi. 开药方antibiotic [ˌæntibaɪ'ɒtɪk] n. 抗生素emergency [ɪ'mɜːdʒ(ə)nsi] n. 急诊germ [dʒɜːm] n. 病菌hospice ['hɔspɪs] n. 收容所end-of-life care 临终关怀

Notes:

① Franciscan (天主教方济各会): the term is usually applied to members who also adhere to the Roman Catholic Church.

Exercises

- Decide whether the following statements are True (T), False (F) or Not Given (NG).
 Letters has been a long and successful practice in caring patients in distance.
 Telemedicine is the name for doctors giving advice to patients by telephone or the Internet.
- ☐ 3. All the health care systems in the United States now offer Virtual Urgent Care.
- ☐ 4. Virtual Urgent Care can be used in every state in the United States.
- \square 5. The workers who provide Virtual Urgent Care must be separately licensed in each state.

 can NOT be used for telemedicine according to the passage. 					
	A. Smartphones		ablets		
	C. Webcam-equipped compute				
2.	Telemedicine has spread rapidl	v into the followi	ng areas EXCEPT		
	A. hospitals		octors' homes		
	C. private physician offices		ome health agencies		
3.	What does Doctor Green do be	fore he decides D	Diana Rae's problem?		
	A. Doctor Green has her describe her symptoms.				
	B. Doctor Green performs a re	B. Doctor Green performs a real physical exam on Diana Rae.			
	C. Doctor Green prescribes an	antibiotic.			
	D. Doctor Green suggests other	r alternatives for	Diana Rae's disease.		
4.	Diana Rae is willing to see a d	loctor by video cl	nat after trying the vide	eo conference	
	because				
	A. she is busy and her condition	n is not serious			
	B. it is safe to treat a patient in	this manner			
	C. doctors who provide Virtua	l Urgent Care are	separately licensed		
	D. She doesn't have to wait for	a long time and	expose herself in hospi	tal germs	
5.	State rules haven't kept pro	gress with deve	lopments in Virtual	Urgent Care	
	because				
	A. safety is a big problem in Virtual Urgent Care				
	B. few companies do Virtual I	Jrgent Care work			
	C. the workers who provide V	rtual Urgent Care	e must be separately lic	censed in each	
	state				
	D. telemedicine is a rapidly gr	owing componen	t of healthcare in the U	Inited States	
C	hoose one proper word for ea	ch blank from t	he list of choices give	en in the box	
be	below. Each word can be used only once.				
	promoted reduce	chronic	proportion	disproves	
	developed consumption	health	avoided	advice	



One of the most commonly-held beliefs regarding __1_ and nutrition in the UK has been found to be untrue, according to a new scientific study. For many years, British people have been recommended to eat at least "five-a-day"—that is five items of fruits or vegetables every day in order to improve their health and prevent the likelihood of illness, in particular cancer. The recommendation was first put forward in 1990 by the World Health Organization which said that the "five-a-day" diet could __2_ cancer and other __3_ diseases.

Since then the <u>4</u> has been a public health policy in many <u>5</u> countries, such as the UK, where the population eat a high <u>6</u> of junk food. Many health campaigns have <u>7</u> the advice, and indeed much food packaging in Britain states how the contents will constitute part of your five-a-day.

However, a study of 500,000 Europeans from 10 different countries <u>8</u> the commonly-believed suggestion that up to 50 percent of cancers could be prevented by increasing the public's <u>9</u> of fruit and vegetables. Instead, the study, which is led by researchers from a well-respected New York medical school, estimates that only 2.5 percent of cancers could be <u>10</u> by eating more fruits and vegetables.

Passage 3

Pre-reading Questions:

- 1. What significant medical discoveries have you heard of?
- 2. Have you ever taken a shot of penicillin?

Discovery of Penicillin

Sir Alexander Fleming was a Scottish bacteriologist who had a genius for technical ingenuity and original observation. His work on wound infection and lysozyme, an antibacterial enzyme found in tears and saliva, guaranteed him a place in the history of bacteriology. But it was his discovery of penicillin in 1928, which started the antibiotic revolution, that sealed his lasting reputation. Fleming was recognized for this achievement in 1945, when he received the Nobel Prize for Physiology or Medicine,