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总 序

值此复旦大学迎来百年华诞之际,复旦大学出版社以其敏锐的学术洞察力策划与组织《博学·大学医学英语系列丛书》,邀请了9位在医学语言学领域造诣颇深的中青年学者组成编委会,共同打造一个自由宽容的学术著作与教材的出版平台,推动我国大学医学英语教学与研究的进一步发展。

医学语言学(Medical Linguistics)作为语言学与医学相交叉渗透的边缘学科,顺应了当今语言学和其他学科跨学科研究这一全球科学发展的总趋势。目前对该学科的概念存在着人文与医学两大界定方法。人文学者将它限定在人文的视域,归属于应用语言学的一个分支,界定为“研究医学论著、教科书中的语言现象,研究医疗活动中的言语行为规律及规范的语言学与医学的交叉学科”。医学界将它归属于医学软科学,界定为“研究语言的医学现象及规律的医学与语言学的交叉学科”,从而出现了“神经语言学”、“病理语言学”、“基因语言学”等等子学科。因此,整合医学与人文社科两方面的医学语言学本体研究,前景广阔,意义深远。它作为一项跨语言学、神经科学、心理学的创新系统工程,对语言教学和语言习得的研究、言语障碍(如失语症)的治疗、人工智能研究、语言的脑机制奥秘的揭示、普通语言学理论的发展等均有着巨大的理论和实践意义。我们希望这套丛书的作者立足教学,勇于创新,最大范围地开展医学语言学的研究。

复旦大学出版社“博学”品牌以严谨、求实、创新在业界享有盛誉。《博学·大学医学英语系列丛书》属于成套的、开放式系列丛书,我们拟不断推出



《医学英语术语学及应用》、《医学英语词汇学》(复旦文科“金穗”研究课题项目)、《医学英语视听说教程》(I ~ III)、《医学英语读写译教程》、《英汉医学翻译概论与实践》、《生物医学英语论文写作指南》等。我们欢迎更多的学者加入到丛书作者的行列。

《博学·大学医学英语系列丛书》编委会

总主编 梁正溜 李定钧

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前 言

《医学英语视听说教程》(Audio-Visual-Oral English for Medical Professionals) 是根据国家教育部颁布的《大学英语课程教学要求》和国内外英语教学发展趋势编写的,旨在提高英语表达应用技能、扩大医学健康知识和发展医学思维。

本书是《医学英语视听说教程》系列的第二册《医学教育与健康服务》(*Medical Education and Health Service*),共 13 单元。第一册、第三册分别是《健康通识》(*General Knowledge of Health*)、《疾病预防与治疗》(*Disease Prevention and Treatment*)。全书涉及现代医学广泛的话题,语言标准地道,图像生动活泼。教程设计为教师运用多媒体教学留下发挥的空间,又十分适合学习者自学。

本教程适合医学院校本科生、研究生,医学卫生专业人员,英语翻译专业人员以及出国学习进修培训之用。本教程每一单元都附有参考文字材料和练习答案。每册教程附赠音像光盘,供学习者参考。

本教程的一部分资料分别来源于美国加州大学电视台、美国国立卫生研究院电台、美国之音、《美国新闻周刊》、《纽约时报》、《华盛顿邮报》、《哥伦比亚百科全书》等。我们对这些资料给中国学生接触和学习现代医学英语带来的很多便利和益处深表感谢,同时也希望使用者提出宝贵意见。

编 者

2006 年 12 月



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Unit 1

Medical Training

Part I Audio-visual Exercises

Task 1 : Glossary Preview

Get familiar with the following words and expressions and match them with their Chinese equivalents.

1. triage center	() A. 骨科的
2. hands-on training	() B. 假的 冒充的
3. curriculum	() C. 内镜的
4. gynecologist	() D. 尸体
5. fake	() E. 伤痕 清肿
6. bruise	() F. 腰椎 腰动脉 腰神经
7. residency	() G. 骶骨
8. neurosurgeon	() H. 全部课程 履历
9. cadaver	() I. 退化的 变坏的
10. orthopedic	() J. 最新的
11. endoscopic	() K. 妇科医生
12. lumbar	() L. 神经外科医生
13. sacral	() M. 麻木 感觉迟钝
14. spine	() N. 手把手地教
15. incision	() O. 住院医生实习期
16. degenerative	() P. 解剖
17. numbness	() Q. 优先治疗中心
18. vertebra	() R. 脊椎 椎骨
19. dissection	() S. 脊柱
20. state-of-the-art	() T. 切入 切开



Continuing Medical Education

Task 2 : Spot Dictation

Watch the first part of the video clip “Continuing Medical Education” and complete the following passage with the words from the video.

Physicians attend years of medical school, and then spend a few more years in _____ (1). And finally, they move on to a private practice, a medical group or a university _____ (2). But the reality is, they never stop learning. Even surgeons go back to class to check out new techniques and compare notes with their _____ (3). So we went to class with a group of neurosurgeons who were learning a new technique for back surgery.

At first glance, this looks like a typical surgery _____ (4). But if you look closer ... no blood, no surgical _____ (5). In essence, these highly skilled surgeons are playing doctors.

2

Task 3 : True or False Statement

Watch the second part of the video clip and decide whether the following information is True (T) or False (F).

- () 1. A neurosurgeon is teaching medical students a new technique for back surgery.
- () 2. Training is conducted on the body donated to the teaching hospital.
- () 3. The new technique is performing endoscopic surgery in the lumbar and sacral spine area of the lower back.
- () 4. The major benefit to patients undergoing endoscopic surgery is the absence of pain.
- () 5. Improved recovery process after surgery is another benefit.
- () 6. Lola Claypool willingly chose endoscopic surgery because of little pain.
- () 7. Claypool says that her condition had to do with her career as police officer.



- () 8. Instead of muscle dissection, only a small incision is made for surgery.

Task 4 : Blank Filling

Watch the third part of the video clip and complete the following questions with the information from the video.

1. Endoscopic surgery isn't a new technique, because orthopedic surgeons have used it _____ to repair damage to the knee.
2. Learning to use the _____ technique in a new way is still necessary for surgeons.
3. Learning how to use old tricks in a new way allows doctors to keep providing patients with _____.
4. Doctors are constantly updating their skills and knowledge for _____.
5. Endoscopic surgery isn't for everyone, but _____ it can be a less invasive surgery alternative.



Changes in Medical Education

3

Task 5 : Note Taking

Watch the video clip "Changes in Medical Education" and take notes according to the cues given below.

1. What doctors have traditionally done to people when they are not feeling well is :
 - A. _____.
 - B. _____.
 - C. _____.
2. The situations that doctors must be equipped to handle :
 - A. _____.
 - B. _____.
 - C. _____.
3. How do these situations affect medical school education ?



They are prompting _____.

4. The changes that have taken place in medical school education :

A. Medical school has moved past _____ and _____
_____ to _____ and _____.

B. Students are also being introduced to _____
_____ never before seen in medical school like elder abuse, domestic
violence and _____.

C. And there is a greater focus on _____ as well.

5. The curriculum being created focuses on :

A. how students _____.

B. how _____.

C. how _____.

6. The reasons why the curriculum focus on the above-mentioned :

A. According to Dr. Wilkes, there's just _____.

B. The smartest and brightest person can't possibly _____.

C. According to Moffit, a medical student, the instructors "do tell us in the
beginning of medical school that about half of what we learn is going to
_____ throughout our careers ... " "I imag-
ine much, much of the things I am _____
not be so useful 20 years from now _____."

7. What students must do in order to be a good doctor in today's world :

A. _____.

B. _____.



Part II Listening Comprehension



Medical Residents

Task 6 : Summary

Listen to a passage “Medical Residents” and complete the following guided summary.

Purpose→ Young doctors work in hospitals for several years to ____ (1) .

The medical residents provide hospitals with needed services in return for not much pay. Under the supervision of medical professors and more experienced doctors, medical residents treat patients, _____

Tasks→ _____ (2) , perform operations, and _____ (3) . In some hospitals residents also _____

Working _____ (4) . Some medical residents work _____ (5) in a single week.

Hours→ They often work for _____ (6) at a time before they can rest.

Reasons→ This system has been criticized because medical residents work too long, _____ (7) and may be too tired to _____ (8) .

Hour The new work limits will be implemented. Most doctors in training will be limited to _____

Limits→ _____ (9) . They will have work periods of _____ (10) .
They will have _____



Responses→ _____ (11) between work periods.

Many medical residents _____
_____ (12) . Others , however , said the new
policy _____ (13) and
their own medical education. The new work limits almost
surely will mean _____
_____ (14) for many hospitals where residents work.

Part III Oral Interpretation



Medical Education in the U. S.

Task 7 : Oral Interpretation

Listen to a passage “Medical Education in the U. S. ”, take notes when necessary and then interpret it into Chinese.

[illegible]



Part IV Reference

Video Script 1 Continuing Medical Education

Beth Ruyak :Physicians attend years of medical school, and then spend a few more years in residency. And finally, they move on to a private practice, a medical group or a university setting. But the reality is, they never stop learning. Even surgeons go back to class to check out new techniques and compare notes with their colleagues. So we went to class with a group of neurosurgeons who were learning a new technique for back surgery.

Host :At first glance, this looks like a typical surgery scene. But if you look closer ... no blood, no surgical masks. In essence, these highly skilled surgeons are playing doctors.

Dr. Kee Kim, a neurosurgeon with UC Davis Medical Center, is teaching other surgeons a new technique for back surgery.

Dr. Kee Kim :One of our main missions is education, and it's not just educating the surgeons in this area and in other areas, but also students.

Host :This type of training is possible in large part due to the generosity of individuals who donate their body to the teaching hospital. The physicians attending the class are learning new skills on a cadaver. Dr. Ardavan Morteza, an orthopedic surgeon based in Yuba City, says surgeons never take this gift for granted.

Dr. Ardavan Morteza :You always, always pay your respects and be very respectful, and you always think about the generosity of this person by donating his body.

Host :During this training class, surgeons are learning how to perform endoscopic surgery in the lumbar and sacral spine area of the lower back. The endoscope is a tiny camera attached to an instrument being used on a surgical site. Dr. Kim explains how the scope works.