全国医护英语水平考试(护理类)应考大全

第二级 Medical English Test System for Nurses LEVEL 2



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图书在版编目(CIP)数据

全国医护英语水平考试(护理类)应考大全(第二级)/李正亚主编; 王洵等编.

一上海:上海外语教育出版社,2012

ISB 978 - 7 - 5446 - 2693 - 4

I. ①全… Ⅱ. ①李… ②王… Ⅲ. ①护理学—英语—水平考试—自学参考资料 Ⅳ. ①H31中国版本图书馆 CIP 数据核字(2012)第 121899 号

出版发行:上海外语教育出版社

(上海外国语大学内) 邮编: 200083

电 话: 021-65425300 (总机)

电子邮箱: bookinfo@sflep.com.cn

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责任编辑: 周岐灵

印 刷: 上海信老印刷厂

经 销:新华书店上海发行所

开 本: 787×1092 1/16 印张17.75 字数465千字

版 次: 2012 年 7月 第 1 版 2012 年 7月 第 1 次印刷

印 数: 3100册

书 号: ISBN 978-7-5446-2693-4 / R · 0006

定 价: 35.00 元

本版图书如有印装质量问题,可向本社调换

特邀编委院校名单(排名不分先后):

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随着经济日益全球化,我国从事医疗服务的人员急剧增多,具备较好医护行业 英语知识和技能的专门人才在市场上逐步突显出竞争优势,更能满足新形势下的岗 位需求。然而,目前国内从事护理行业人员的护理英语知识普遍匮乏,实际应用能 力相对欠缺。

为了更好地贯彻教育部考试中心"关于在国内高、中等医学院校开展《全国医护 英语综合等级证书》(护理类)考试的通知"(教试中心函[2007]23号)文件精神,为了 考查护理专业在校生以及在职医护人员医护专业英语的实际应用能力,为了帮助广 大医护专业学生顺利通过医护英语水平考试(第二级),同时也为了弥补目前市场上 相关辅导材料的欠缺,我们结合从事医护英语教学、辅导工作多年的老师们的经验, 精心打造了这本应考大全。

本书是全国医护英语水平考试(护理类)辅导用书,内容包括:医护英语水平考 试(METS) 简介; METS [[考试内容简介; METS][模拟试卷 10 套和 METS 样卷 2 套(含 标准答题卡、听力原文和答案及解析);常用医护英语词汇表;参考文献。模拟试题 在题型和难易程度上力求与护理英语水平考试(第二级)新大纲要求保持高度一致, 旨在帮助广大学子熟悉新题型、新要求,在考试中取得优异成绩。 医护英语词汇表 收集了书中出现的以及其他常用的医护英语词汇,方便学生查阅。

本书的特点是:内容丰富,覆盖面广;题目设计针对性强,难易适中;兼顾在校生 和在职医护人员,实用性强;具有代表性,在同类教辅中起着引领作用。

参与本书编写的 12 位教师都从事护理英语教学和 METS 考试辅导工作多年,教 学经验丰富。该编写团队曾获得"全国医护英语考务工作突出贡献奖"和学院"课程 改革与专业建设先进集体"等荣誉,所著《实用护理英语》一书被所在学院评为精品 教材。

我们在本书的编写过程中征求多方专家意见,力求做到规范、严谨。但由于水 平有限,不当之处在所难免。我们诚挚地希望本书的使用者提出宝贵意见,予以批 评指正。本书的编写得到了外籍专家 Steven Cornelsen 和 Scott Edwards 的鼎力帮助, 同时也得到了兄弟院校和上海外语教育出版社的大力支持,在此一并致以诚挚的 谢意。

> 编 者

METS 考试简介

中国加入 WTO 后,中国政府履行对外承诺,允许设立中外合资、合作医疗机构,允许外籍医生凭有效证照在我国执业。近年来,中外合资、合作医院和国内三级甲等医院对具有国际护理水平的护士需求呈直线上升趋势,提高护理专业人才的外语技能和国际化水平已成为我国护理界面临并亟待解决的重要课题。同时,随着国内人才市场改革的深入,医护人才大规模跨地区流动,急需建立一套全国统一的、具有权威性的医护专业英语评价体系。

为适应经济全球化、医护人才国际化的发展,满足国内人才市场资源配置的新需求,促进医护专业英语水平的提高,在卫生部、教育部和国家外国专家局等相关部门的支持下,国家教育部考试中心、中华医学会、中华护理学会、中国国际人才交流协会等机构联合推出了全国医护英语水平考试(Medical English Test System, 以下简称 METS)。

METS 被列为国家引智"十一·五"规划重点项目。该考试为标准参照性考试,从低到高分为三个级别。考生通过了考试即可获得相应级别的合格证书。

METS 主要面向医护专业在校生,同时也接受社会考生,考查考生医护专业英语的实际应用能力,为用人单位录用与考核员工提供依据。

METS 由医护英语水平考试办公室(以下简称 METS 考试办公室)设计并组织实施。每年举办两次。考试时间分别为每年 6 月和 12 月的第一个星期六。若与国家法定节假日时间相冲突, METS 考试办公室会提前通知。

METS(护理类)二级考试内容简介

一、考试形式

考试形式为笔试(含听力测试),试卷由试题和答题卡两部分组成,考生应将全部答案填写在答题卡上。

二、考试题型

METS II (护理类)考试(笔试)由两大部分构成: I.听力(Listening); II.阅读与写作 (Reading and Writing)。考试时间为 120 分钟,满分为 100 分。其中听力部分有 4 项任务,20 道试题,每题 1 分,共 20 分;阅读与写作部分有 7 项任务,46 道试题,1-45 题每题 1 分,共 45 分,第 46 题 15 分。整份试卷原始分数为 80 分。METS II (护理类)考试(笔试)采用了分数 加权的办法,对各部分题目的原始分数分别给予不同的权重。其中听力部分(1-20 题)占满分 100 分权重的 30%,阅读部分(1-45 题)占 50%,写作部分(46 题)占 20%。

METS Ⅱ(护理类)考试(笔试)试卷结构如下表所示:

	测试任务类型'		为考生提供的信息	题目数量	原始分数	权重(%)	时间(分钟)
	Part 1	信息匹配	短对话	5	5		30
T 115-4-	Part 2	信息判断	长对话	5	5	20	
Ⅰ.听力	Part 3	多项选择	长对话	5	5	30	
	Part 4	填写表格	长对话	5	5		
4	Part 1	信息匹配	告示	5	5		60
	Part 2	信息匹配	段落	10	10	50	
п этын.	Part 3	信息判断	短文	10	10		
Ⅱ. 阅读与 写作	Part 4	多项选择	短文	5 5	5	50	60
311	Part 5	补全短文	短文	5	5	×	
1	Part 6	完形填空	短文	10	10		
	Part 7	短文写作	表格	1	15	20	30
总计				65+1	80	100	120

^{*} 实际考卷中可能会出现新任务类型



Model Test One · · · · 1
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Model Test Three ····· 24
Model Test Four ····· 35
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MODEL TEST ONE

I. Listening

Part 1

Questions 1-5

- You will hear five patients complaining of their sufferings to the nurse.
- What complaint does each patient have?
- For questions 1–5, mark the correct letter A–H on your answer sheet.
- You will hear each conversation twice.

Example:

- 0. Longbottom
- 1. Rochester
- 2. Tom
- 3. John
- 4. Hudson
- 5. Bracknell

- A Headache.
- **B** Pain in the stomach.
- C Coughing and fever.
- D Pain in the back.
- E Sweats at night.
- F Pain in the hands.
- G Cold.
- H Pain in the leg.

Part 2

Questions 6-10

- You will hear a conversation in the emergency room between a doctor and the patient,
 Mr. Neo.
- For questions 6-10, decide if each sentence is correct or incorrect.

_					
	mple:				
0.	Mr. Neo suffers from diarrhea and feels se	evere pain in stomach.		Yes	
			В	No	Ш
6.	Mr. Neo has stomach pain with a feve	r and diarrhea.	A	Yes	
			В	No	
7.	Mr. Neo is ill because he has eaten the	e food contaminated with	A	Yes	
	bacteria.	Tood comammated with		No	
			2	110	
8.	The doctor gives Mr. Neo the diagnosis	is after a series of tests.	A	Yes	
			В	No	
9.	The doctor gives Mr. Neo an intraver	nous injection in case of	A	Yes	
	dehydration.		В	No	
10	Ma Nas Samural a 18st and a	1'- 4'11 6		17	
10.	Mr. Neo is suggested to drink much w	vater, eat digestible food		Yes	
	and exercise regularly.		Ь	No	
	PART 3				
Qu	estions 11-15				
•	You will hear a conversation in the obswoman.	stetric ward between a do	octor a	nd a pr	egnant
•	For questions 11-15, choose the correct ar	nswer A , B or C . Put a tick	(√) in	the box	. Then
	mark the corresponding letter on your ans	swer sheet.			
•	You will hear the conversation twice.				
	How often is the woman's period?	A Regularly.			
11		a regularly.			
11.	riow often is the woman's period;	B Miss one period.			

• If it is correct, put a tick (\checkmark) in the box next to **A** for **YES.** If it is not correct, put a tick (\checkmark) in the box next to **B** for **NO.** Then mark the corresponding letter on your answer

12. The doctor will give the woman some medicine	A orally B by injection
	C orally and by injection
13. Where is the pain?	A In the lower abdomen. B In the lower stomach. C In the upper abdomen.
14. What's wrong with the woman?	A Pregnant. B Miscarriage. C Stomach pain.
15. Three days later, the attacks of the pain recur	A every 5 to 8 minutes B every 7 to 10 minutes C every 7 minutes
 You will hear a conversation in the Outpapatient. Listen and complete questions 16-20 on you You will hear the conversation twice. 	
Surname Connolly First Name (16)	
Age 28 Sex M Date of Admission (17) Occupation (18) Hospital No. 453789	Marital Status M
Present Complaint (19) High blood pressure	
General Condition Good CVS HR 70/minBP (20)	

II. Reading and Writing

Part 1

Questions 1-5

- Look at the expressions used in the hospital environment.
- Match the instructions (1–5) to the expressions from the conversations (A–F).
- Mark the correct letter A-F on your answer sheet.
- 1. Ask for assistance
- 2. Criticize sb. for a mistake
- 3. Express gratitude to others
- 4. Share working experience
- 5. Confirm duty schedule

- Would you like to do me a favor? I don't think I can understand the IV infusion chart. I cannot recognize the spelling.
- **B** Let me check my duty table. I wonder whether I'm on night shift today.
- I really appreciate all the things you've done for me. It's very kind of you to do this.
- ▶ Penicillin mustn't be used without a skin test. I don't think it's an excusable mistake.
- Hey, guys, I think it's more efficient if the catheter is inserted like this.
- Today's equipment is very safe for you and your family. However, make sure that you dispose any sharps safely.

Part 2

Questions 6-15

- Read the descriptions of six cases.
- Which case (A-F) mentions this (6-15)? The cases may be chosen more than once. There
 is an example at the beginning (0).
- Mark the correct letter A-F on your answer sheet.

Which case mentions someone who

had high blood pressure?

0 E

6 had allergy to penicillin? had no bowel movement? 9 had pain in chest? 10 underwent an operation? 11 bled from the nose and mouth? 12 was diagnosed with pneumonia? had red spots in arms and legs? 13 suffered from shortness of breath? 14 15 had no appetite?

CASE A

A 36-year-old man complained of shortness of breath. The pain of his throat was made worse by deep breaths and coughing. The shortness of breath persisted over 4 hours. He had a slight non-productive cough. In the respiratory system, expansion is reduced because of pain. There is a pleural rub over the right lower zone. No other added sounds. No other abnormality is detected.

CASE B

Mr. Martha, 36 years old, was admitted on 23 April, 2009. The past medical history revealed IDDM (insulin-dependent diabetes mellitus) and hypertension. An attack of myocardial infarction occurred to him four months ago and he underwent an operation of femoral-popliteal bypass as a treatment. He takes medication of insulin regularly, half an aspirin and multivitamin. He has a history of allergy to penicillin and codeine.

CASE C

This is a 48-year-old man. About two weeks ago, he began to feel weak and lose his appetite. Two days ago, in the morning, he noticed some pain in the chest, increasing with deep breathing and coughing. He brought up large amount of yellowish sputum. He remained in this condition during the entire day, and that night he was seen in the emergency room. He was admitted with a diagnosis of pneumonia.

CASE D

Mr. Richard, a 43-year-old man, came to the emergency room complaining of 3 days of worsening abdominal pain. The pain is localized to the left lower quadrant of his abdomen. It began as an intermittent crampy pain and now has become steady and moderately severe. He had a small loose stool at the beginning of his illness, but not had any bowel movement since then. On examination, his chest is clear, and his heart is regular without any

murmurs. Rectal examination reveals tenderness and his stool is negative for occult blood.

CASE E

Mrs. Jones, 27 years old, a worker, was sent to the emergency room on April 3. She complained of bleeding from her nose and mouth. She found some reddish spots on her lower extremities. She has no vomiting, nausea, abdomen pain and joint pain. She never had nose bleeding before this episode. There is no family history of abdomen bleeding. The patient doesn't take any medicine before coming to hospital. On examination, she is alert, sometimes anxious. Her blood pressure is 160/110mmHg and her heart rate is 90 BMP. Temperature is normal. No enl-

argement of liver and spleen. Skin exam shows multiple red spots on her lower extremities.

CASE F

This 60-year-old retired worker complained of chronic bronchitis characterized by an early morning cough productive of whitish yellow sputum for about ten years. He stopped smoking one month ago and then cough seemed to have improved, but 3 weeks ago he noted blood-tinged sputum. Two weeks ago he developed a sharp stabbing pain in the left chest, at first somewhat but later actually pleuritic for a 48-hour period. Now, he has had a low-grade fever, some anorexia, slight weight loss, but no chills or dyspnea.

PART 3

Questions 16-25

- Read the following passage.
- Are sentences 16-25 "Right" or "Wrong"? If there is not enough information to answer "Right" or "Wrong", choose "Doesn't Say".
- For each sentence 16-25, mark one letter A, B or C on your answer sheet.

Sources of Pain in Labor

The big question in everyone's mind is, "How much pain will there be for me during labor?" While we can't answer that question specifically, we can help identify some of the causes of pain and methods to deal with them.

There are three main causes of pain during childbirth: emotional, functional, and physiological.

Emotional sources of pain can be: fear, the unknown, lack of education, etc.

These can actually cause and intensify pain. Childbirth education is a great way to combat this problem, although it will not eliminate it. It will enable those participating in the birth process to have a working knowledge of what is going on. This is not limited

to classroom instruction, but also includes: reading, touring birth facility, discussion with care providers and numerous other sources of information.

Functional sources of pain can be: cervical dilatation, contractions, descent of the baby, position, procedures, etc.

Your muscles are working, and this may cause pain which can be reduced by relaxation. Holding your breath and fighting



contractions can actually hinder dilatation and labor, and be more painful by depriving your uterus of oxygen and creating tension. Position is very important in the birth process. Certain positions, such as lying on your back, can be harmful and painful. Changing positions and remaining mobile can help to reduce this pain. Procedures, such as amniotomy (羊膜切开术), vaginal exams and monitoring can cause pain themselves, by limiting mobility, or by creating anxiety.

Physiological sources of pain can be: derivations from "normal".

These will not occur with everyone, but are possibilities that you need to know how to deal with. One of the most common examples is a back labor caused by the posterior baby, this can occur in up to 25% of labors. This pain can be dealt with by trying to encourage the baby to turn by using a variety of positions, water, etc. Sometimes unusual pain may be a sign of problems.

16.	Th	nis text can answer	the question	n "How muc	h pain will th	nere be for me during			
	lal	bor?" specifically.							
	A	Right	В	Wrong		C Doesn't Say			
17.	Th	nere are only three sou	rces of labor	pain: emotiona	al, functional a	nd physiological.			
	A	Right	В	Wrong		C Doesn't Say			
18.	Cł	nildbirth education o	an help red	uce the functi	onal source of	labor pain.			
	A	Right	В	Wrong		C Doesn't Say			
19.	Some positions can be helpful in the childbirth process.								
	A	Right	В	Wrong		C Doesn't Say			
20.	H	olding breath during	childbirth (can reduce fu	nctional source	e of labor pain.			
	A	Right	В	Wrong		C Doesn't Say			
21.	Fu	inctional sources of	labor pain v	vill not occur	with everyone				
	A	Right	В	Wrong		C Doesn't Say			
22.	Ba	ack labor takes up o	ne fourth o	f labors, so p	osition chang	ing plays an important			
	ro	le in reducing physic	ological sour	rce of labor pa	ain.				
	A	Right	R	Wrong		C Doesn't Say			

23. Because not everyone will have physiological sources of labor pain, it's not necessary to know how to solve the problem.

A Right

B Wrong

C Doesn't Say

24. If your muscle is working during childbirth, you can have less pain.

A Right

B Wrong

C Doesn't Say

25. Some surgical procedures can cause labor pain.

A Right

B Wrong

C Doesn't Say

PART 4

Questions 26-30

- Read the text on the mouth ulcer.
- For questions 26-30, choose the answer (A, B or C) which you think fits best according to the text.
- Mark the correct letter A, B or C on your answer sheet.



Oral Ulcer

A mouth ulcer is an open sore inside the oral cavity. The types of oral ulcers are diverse, with a multitude of associated causes including: physical or chemical trauma, infection from microorganisms or viruses, medical conditions or medications, cancerous and sometimes nonspecific processes. Once formed, the ulcer may be maintained by inflammation or secondary infection.

The symptoms preceding the ulcer may <u>vary</u> according to the cause of the ulcerative process. Some oral ulcers may begin with a sharp stinging or burning sensation at the site of the future mouth ulcer. In a few days, they often progress to form a red spot, followed by an open ulcer.

The oral ulcer appears as a white or yellow oval with an inflamed red border (边缘). Sometimes a white circle or halo around the lesion can be observed. The grey, white, or yellow colored area within the red boundary is due to the formation of layers of fibrin, a protein involved in the clotting of blood. The ulcer is often extremely painful, especially when agitated.

There are many processes which can lead to ulceration of the oral tissues. In some cases they are caused by an overreaction by the body's own immune system. Factors that appear to provoke mouth ulcers include stress, fatigue, illness and injury from accidental biting, hormonal changes, menstruation, sudden weight loss, food allergies and

deficiencies in vitamin B12, iron and folic acid.

Treatments based on antibiotics and steroids are reserved for severe cases, and should be used only under medical supervision.

26. V	Which	of t	he	following	can NOT	cause oral	ulcer
-------	-------	------	----	-----------	---------	------------	-------

A Virus.

B Cancer.

C Medication.

27. What's the meaning of the underlined word "vary" in the second paragraph?

A Be different.

B Very.

C Be special.

28. The ulcer is more painful when

A it's hot

B it's scratched

C it's agitated

29. Which do you think is the best publishing type for the text?

A Newspaper.

B Magazine.

C Advertisement.

- 30. Which of the following is NOT true?
 - A Oral ulcer is an open sore inside the oral cavity.
 - **B** A red spot is often followed by an open ulcer.
 - C Every oral ulcer should be treated by antibiotics.

PART 5

Ouestions 31-35

- Read the following procedures for administering IV infusion.
- Choose from the procedures A-F the one which fits each gap (31-35). There is one extra
 procedure which you do not need to use.
- Mark your answers on the separate answer sheet.

Administering IV Infusion

Procedure

- I. Get the IV bag ready.
- II . (31)
- III. Check the IV bag against the IV prescription.
- IV. (32) _____, you run the IV fluid through the IV tubing of the giving set.
- V. Make sure that the giving set has one end to go into the IV bag and the other end is for connection to the patient's cannula.
- VI. Run the IV infusion through an IV infusion pump.
- **I** . (33) _____
- VII. Start the infusion pump and the pump is just for running a test.
- \mathbf{X} . (34)

