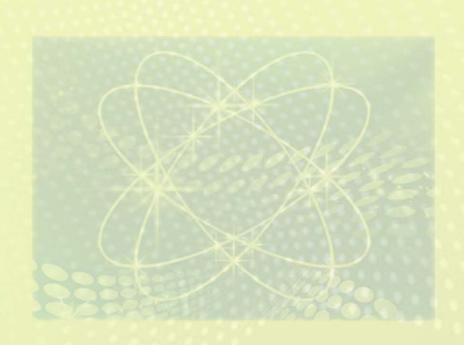
# 临床护理实用医学英语



# 目录

Unit One	7
Unit Two	21
Unit Three	35
Unit Four	49
Unit Five	65
Unit Six	82
Unit Seven	97
Unit Fight	113

# 临床护理实用医学英语

——— 评估、分析、计划、实施与评价

# MEDICAL ENGLISH FOR CLINIC NURSING

(Assessing, Analyzing, Planning Implementing and Evaluating)

# Introduction

#### Part I

**Nurse and Nursing Education** 

#### 1. What is a nurse?

# 什么是护士?

A nurse is a person who obtains the nurse practicing certificate after registration, in accordance with the regulations in nursing activities to fulfill the protection of life, reduce pain, improve health responsibilities of health professionals. She works in a wide variety of specialties where they may work alone or as a team to assess, plan, implement and evaluate care.

护士,是指经执业注册取得护士执业证书,依照本条例规定从事护理活动,履行保护生命、减轻痛苦、增进健康职责的卫生技术人员。护士的工作范围广泛,在他们所从事的事业中,他们可能单独或作为一个团队来做问诊,计划,实施和评估护理的工作。

# 2. Nursing Education 护理教育

The development of higher nursing education in the United States and western developed countries have many similarities, which are the main hospital nurse training "Nightingale" type as the basis. Nursing education in the United States, after more than a century of development, has formed a set of flexible education system and the diversity of training mode; built up a complete system, from low to high, from application-oriented research training with reasonable scale and proportion After the change of course from hospitals to universities education model, it has developed today with a complete educational support system. In the United States, nursing is not subordinate to medical science but an independent scientific system of nursing profession, higher social status. Nursing education in the United States has been growing more rapidly than in other countries, the nursing education system is relatively perfect. The reason why the United States in nursing education has leapt into the front ranks of the world, it is dependent on both a large number of highly

educated talents, and at the same time, an echelon reasonable and effective training and education system.

美国与西方发达国家的高等护理教育发展有诸多相似之处,其主线都是以"南丁格尔"式的医院护士培训为基点,历经从医院到高等院校的教育模式的变革历程,发展到今天具有完备的教育支撑体系。美国的护理教育经过一个多世纪的发展,形成了一套灵活的教育体制和多样的培养模式,构建起一个由低到高、从应用型培训到研究型培养的完整体系,规模与比例合理。在美国,护理学不从属于医学而是一门独立的科学体系,护士从属独立的护理职业,社会地位较高。美国的护理教育比其它国家发展得更为迅速,护理教育体系相对完善。美国的护理教育之所以位于世界前列,正是依赖于既拥有大量的高学历人才,同时又有一个梯次合理有效的培养教育体系。

# 3. Nursing Trend 护理的趋势

With the transformation of medical model and updating health concept, nursing has become a "people-centered" professional; nursing education, from biomedical model to biological, psychological, social patterns; nursing concept, from "disease nursing model" to "centered on people's health" direction; nursing model, from diseases nursing to holistic nursing model. The focus in providing nursing care has shifted from the illness and medical diagnosis to the patient as a total human being with various body functions that can be disrupted or changed due to the illness. The nurse's goal is to help patients return to as "normal" a level of functioning as they can and, in the meantime, to adapt to the changes caused by illness. Modern nursing trend is patient-centered care, which is based on patients' physical and mental, social and cultural needs, in accordance with nursing care plan to achieve overall nursing of body and mind, health education and community care. This is also the trend and direction of the development of the nursing in the 21st century.

随着医学模式的转变和健康观念的更新,护理学已经成为"以人为中心"的专业,护理教育从生物医学模式转向生物—心理—社会模式,护理观念从"以疾病为中心"向"以人的健康为中心"方向转变,护理模式也已从疾病护理模式向整体护理模式转变。李泽楷.当代国际护理教育的基本特征与发展趋势 [J].中国高等医学教育,2000(15): 9.护理重点已经从病人的疾病和医疗诊断转向关注患者由于疾病给身体各种功能能带来的影响或改变。护士的目标是帮助患者恢复"正常"水平的功能,同时,适应由疾病引起的变化。现代护理趋势是以病人为中心,根据病人身心、社会及文化等需要,按护理计划、护理方案进行身心整体护理、健康教育和社区保健,这亦是21世纪护理发展的趋势和方向。

#### Part II

# Nursing Process 护理步骤

Nurses gather information from the patients and other sources, sort the information, plan and organize the nursing care, give the nursing care, and then find out if the care is working. This is done through a system called the nursing process. Nurses in the

United States are taught to use an orderly sequence of steps in giving care. These steps—the nursing process—are a way of solving problems or thinking about and planning the care that will be given to the patient (sometimes called the client). There are five steps in the nursing process: (1) assessing, (2) analyzing, (3) planning, (4) implementing, and (5) evaluating.

护士收集、分类来自病人和其他来源的信息,计划、安排和实施护理,然后检查护理工作是否有效。这些工作是由护理过程系统完成的。美国的护士所接受的护理教育是有序的步骤序列护理。这些步骤或护理过程,是解决问题或思考和规划,将给予病人的护理(有时也称为客户端)的方法。护理过程中的五个步骤: (1)问诊(2)分析(3)规划(4)实施(5)评估。

# 1. Assessing

收集资料 (问诊)

Assessing is the first step that the nurse gathers information about the patient. The nurse gathers subjective information and objective information. Subjective information is what the patient tells you in the interview about what he/she is feeling, seeing, hearing, or thinking. Objective information is the information the nurse gathers through the senses of vision, hearing, touch, and smell in a physical examination of the patient. The information the nurse gathers on the physical assessment must be recorded as accurately, clearly, and completely as possible.

问诊是护士收集病人有关信息的第一步。护士收集主观信息和客观信息。主观信息是病人在问诊中说到的他/她的感觉,视觉,听觉或思维的情况。客观信息是护士给病人体检时通过自己的视觉,听觉,触觉,和嗅觉所收集到的信息。体检的信息必须是尽可能准确、清楚和完整地记录下来。

# 2. Analyzing

# 分析

The second step in the nursing process is analyzing the information gathered in the assessing step. Analyzing means to break down and look at the parts of the information to make conclusions about the condition of the patient. The conclusion made is called the nursing diagnosis. A nursing diagnosis differs from a medical diagnosis. A nursing diagnosis focuses on the patient's response to his disease and to the changes it causes in him. It deals with the patient's actual problems and probable cause. Making a nursing diagnosis is not a simple matter. It requires the nurse to identify multiple problems, to gather information continually to change old nursing diagnoses, and to make new nursing diagnoses as the patient's condition changes.

护理过程的第二步是分析问诊中收集到的信息。分析就是综合分析问诊的内容, 对病人的病情做出结论。所做的结论称为护理诊断。护理诊断不同于医学诊断。 护理诊断是关注病人对疾病所做出的反应以及疾病在身体的变化。它涉及病人的 实际问题和可能的原因。做护理诊断不是一件简单的事。它需要护士发现问题, 不断收集信息来改变旧的护理诊断, 当患者的病情有变化时, 做出新的护理诊断。

#### 3. Planning

# 计划

The third step in the nursing process is planning. In this step the nurse answers the questions: What is to be done? How is it to be done? When is it to be done? The answers are used to make a nursing care plan. A nursing care plan is one way that nurses communicate about the nursing care each patient is being given. Each nursing care plan includes the following:

- a. information about the patient, such as name and age
- b. nursing and medical diagnoses
- c. nursing goals and objectives
- d. deadlines for meeting the nursing goals and objectives

A nursing care plan is revised daily or more often, according to changes in the patient's condition and the type of care he needs as a result. The nursing care plan is used not only for the patient's care while he is in the hospital but also to plan for his discharge, it is particularly important to involve the members of the patient's family at this planning stage.

护理过程的第三步是计划。在做计划时,护士要回答:准备做什么?怎么做?什么时候做?答案是用来制定护理计划的。护理计划是护士与每个病人的护理的一种沟通方式。每份护理计划包括以下内容:

- a.患者的信息,例如姓名和年龄
- b.护理诊断和医疗诊断
- c.护理目标
- d. 达到护理目标的最后期限

护理计划是根据病人的病情变化所需要的护理方式每天或者经常都要修改的计划。护理计划不仅用于病人住院期间的护理,也用于出院后的护理。所以特别重要的是在规划阶段就要考虑到患者的家庭成员。

#### 4. Implementing

# 实施

In this step you, the nurse, actually give nursing care to the patient; you implement the nursing care plan. Nursing actions 护理工作 are of three types: dependent nursing actions, independent nursing actions, and interdependent nursing actions. In dependent nursing actions, the nurse carries out the medical orders written by the physician, such as giving medications and performing some treatments. Independent nursing actions are those carried out according to the nursing orders. Interdependent nursing actions are carried out by the nurse in connection with a physician orders and/ or in cooperation with other members of the health care team, such as the dietitian. 在这个步骤中,实际上护士就是在做护理病人;实施护理计划的工作。护理工作分为三种类型:依赖护理;独立护理和相互依赖护理。依赖护理指,护士完全根据医嘱进行护理,例如给患者发药和做治疗。独立护理是根据护嘱进行护理。相互依嘱证行护理,例如给患者发药和做治疗。独立护理是根据护嘱进行护理。相互依

赖护理是指护士结合医嘱或与卫生保健团队的其他成员合作,例如营养师,而进行的护理工作。

# 5. Evaluating

# 评估

Evaluating, the last step in the nursing process, means to determine the success or worth of something. To evaluate the nursing care plan, ask yourself questions such as: 评估是护理过程中的最后一步,用于确定什么是成功或有价值的事。在评估护理计划时,问自己这样的一些问题,例如:

- 1. Is the nursing care plan working? 护理计划有作用吗?
- 2. Is the nursing care helping the patient to move toward his long-term goals? 护理有助于病人向长期目标发展吗?
- 3. Is the nursing care helping the patient to reach his short-term objectives in the time given?

护理有助于患者在指定的时间达到短期目标吗?

- 4. Is the nursing care keeping the patient safe and as comfortable as possible? 护理使病人感到安全、舒适吗?
- 5. Are nurses using their own and the patient's time and energy in the most efficient way when giving care?

护理时,护士是以最有效的方式使用自己和病人的时间和精力进行护理吗?

- 6. Are nurses being careful not to waste supplies and equipment (which could be expensive to the patient and the hospital or health care agency)? 护士是否小心不浪费医疗用品和器材(对病人和医院或医疗机构来说,这些东西都是昂贵的)?
- 7. Have the patient's problems been solved in part or completely by the nursing care? 护理解决了患者部分或完全的问题?
- 8. Have any new patient problems been found since starting to implement the nursing care plan? Were any of these problems a direct result of the nursing care? 开始实施护理计划后,发现了患者有新的问题吗?这些问题是护理导致的直接结果吗?
- 9. Were any errors made in the patient assessment, the nursing diagnosis, nursing orders, or nursing care?

对病人进行的问诊、护理诊断、护嘱,或护理有差错吗?

10. What changes, if any, need to be made in the nursing care plan? 如果患者的情况发生变化,护理计划需要做何修改?

The answers to these questions will help you and the other nurses continue or change the nursing care which the patient needs. Answering these questions should also help each nurse give the best nursing care possible as she works with patients and moves through the steps in the nursing process.

回答这些问题将有助于护士是否延续或改变病人的护理需求;也会有助于护士在护理过程中的步骤给患者提供最好的护理。

# **Unit One**

Directions: In this unit, there are ten pieces of information about different patients. This "situation" or "case study" information is found between two lines. Several questions will be asked about the patient information given to you in the situation. After each question, you will be given four possible answers. Only ONE answer is right. Choose the ONE answer you think is right. At the end of each question, you will find the right answer and the explanation about why the answer is right and the explanation should help you understand not only why the answer is right but also sometimes about how nursing is practiced.

#### **Words and Expressions**

psychiatric	[	] adj. 精神病学的
therapeutic	[	] adl. 治疗的;治疗学的
depression	[	] n. 抑郁

Margaret Dunneden is a 40-year-old businesswoman who was admitted to the psychiatric unit 2 days ago with severe depression.

- 1. Mrs. Dunneden says to nurse. "I'm terrible. I don't deserve to live." Which of the following responses by the nurse would be most appropriate?
  - A. "Yes, it has occurred to us that you have that opinion of yourself."
  - B. "If you continue to talk this way, I can't listen to you any more."
  - C. "What has led you to think that you don't deserve to live?"
  - D. "I don't think you're terrible. Don't you think you're liked here?"
- 2. When the nurse tells Mrs. Dunneden that he will be meeting with her for regular interviews, she says, "Why would you want to do that?" What would be the therapeutic response?
  - A. "I think you're worth the time and effort."
  - B. "I have been assigned as your therapist."
  - C. "You need to talk about your feelings."
  - D. "You can't get better without help."

- 3. One day, the nurse notices Mrs. Dunneden sitting alone in the television lounge; and although the TV is on, she is not watching it. Which of the following would be the most therapeutic way to open a conversation with her?
  - A. "What are you feeling?"
  - B. "Do you like TV?"
  - C. "Tell me how you are doing today."
  - D. "You're not watching TV."

# 4. Which of the following statements about suicide is accurate?

- A. Suicide is the leading cause of death in this country among all age groups and among adolescents.
- B. Depressed persons attempt suicide as an expression of anger.
- C. Hospitalized persons rarely attempt suicide.
- D. A person who talks about suicide will not attempt it.

#### **Words and Expressions**

widow [	] n. 寡妇
fracture [	] n. 骨折
manifestation [	] n. 表示,显示
osteoarthritis [	] n. 骨关节炎
urinary retention [	] n. 尿潴留
diplopia [	] n. 复视
tinnitus [	] n. 耳鸣

Alda Clark is a 75-year-old widow, who maintains her own residence. While cleaning the snow off her walk, she slipped and fell.

Alda Clark

- 5. You notice Mrs Clark is unable to move her left leg. Your first priority is to.
  - A. Extend her leg into a normal position.
  - B. Try and reduce the fracture.
  - C. Elevate the extremity.
  - D. Treat her as if a fracture had occurred.
- 6. You suspect that Mrs. Clark fractured her left hip because of which of the following manifestations?
  - A. Edema around the site.
  - B. Internal rotation of the left hip
  - C. Abduction of the left hip
  - D. Shortened right leg.
- 7. Mrs. Clark has bad osteoarthritis for years. She takes aspirin 600 mg q4h to relieve the pain. Side effects of aspirin are indicated by which of the following signs?
  - A. Urinary retention
  - B. Bradycardia
  - C. Tinnitus
  - D. Diplopia

# **Words and Expressions**

hemophilia	[	] n. 血友病
contaminate	[	] vt. 污染,弄脏
hemarthrosis	[	] n. 关节积血; 关节血肿
immobilize	[	] vt. 使固定; 使不动

Thirteen-year-old Darren has hemophilia, and has recently been diagnosed with acquired immune deficiency syndrome (AIDS) resulting from contaminated blood products. Darren is currently free from infectious disease.

- 8. Darren has been hospitalized for hemarthrosis of his left elbow. He is complaining of severe elbow pain. In addition to placing Darren on bedrest, the nurse should
  - A. Apply a heating pad to Darren's left elbow.
  - B. Give Darren aspirin gr X po.
  - C. Gently perform passive range-of-motion exercises to Darren's left elbow.
  - D. Elevate and immobilize Darren's left elbow in a flexed position.
- 9. The nurse plans to obtain a nursing history from Darren and his mother. No direct body contact with Darren will be necessary during this time. Since Darren has AIDS, the nurse should take which precautions?
  - A. Wear a mask only.
  - B. Put on a mask and gown.
  - C. Wear a mask, gown, and gloves.
  - D. No special precautions are needed.

# **Words and Expressions**

nasogastric gavage [		] n. 鼻饲法		
diphenhydramine hydroch	loride [		] n.	盐酸苯海拉明
elixir [ ] n. 万	<b>「应灵药</b>			
syringe [	] n. 注射器			
unilateral [	] adj. 单边的			

Two-month-old Evan Martin was born with a unilateral complete cleft lip, and is 12 hours post-op surgical repair of the lip. His mother is staying is his hospital room.

# 10. Evan is acting fussy and starts to cry softly. The nurse should

- A. Encourage Evan's mother to hold and rock him.
- B. Give Evan his pacifier and rub his back.

- C. Sedate Evan with diphenhydramine hydrochloride (Benadry I) elixir 2.5mg.
- D. Allow Evan to cry to facilitate lung inflation.
- 11. Evan's oral feedings of 4 to 6 ounces of infant every 4 to 5 hour are to be resumed. The nurse should teach Mrs. Martin to feed Evan using what method?
  - A. A bottle with a soft nipple
  - B. A small paper cup
  - C. A syringe with catheter tubing
  - D. Nasogastric gavage
- 12. While feeding Evan, Mrs. Martin asks the nurse. "Why do you think this happened to Evan?" The nurse should reply
  - A. "Cleft lip probably occurrences in your family."
  - B. "Sometimes it's hard to know why these things happen."
  - C. "Did you have any infections or take any drugs while you were pregnant?"
  - D. "What thoughts do you have about why it happened?

# **Words and Expressions**

mycobacterium tubercu	losis [	]	n.	结核杆菌
pulmonary [	] adj. 肺的			
tertiary [	] adj. 第三期的;处于第三阶段的			
tuberculin [	] n. 结核菌素			

Oscar Brown, age 37, has had a cough and fatigue for several weeks. A sputum culture is positive for Mycobacterium tuberculosis.

# 13. Which of the following best prevents the transfer of the tuberculosis organism?

- A. Having Mr. Brown cover his nose and mouth with double-ply tissue when he coughs or sneeze
- B. Instructing Mr. Brown's family in effective hand washing

- C. Having Mr. Brown's laundry disinfected after use
- D. Having Mr. Brown's dishes sterilized after use
- 14. Mr. Brown and his family ask many questions when first told about his diagnosis, e.g., "How did this happen?" What can we do? What will happen?" The nurse's best response might be which of the following?
  - A. "Mr. Brown probably contracted tuberculosis from another person with tuberculosis."
  - B. "Mr. Brown will be given medication and treated at home."
  - C. "You need not be concerned; tuberculosis is curable."
  - D. "You seem very worried about the tuberculosis. What concerns you most?"

#### 15. The definitive test for the diagnosis of tuberculosis is

- A. A positive PPD skin.
- B. A positive sputum culture.
- C. Abnormal finding's on chest x-ray.
- D. Abnormal results of a pulmonary function test.

# 16. Screening a population for tuberculosis with tuberculin skin testing is an example of

- A. Primary health promotion.
- B. Secondary health promotion.
- C. Tertiary health promotion.
- D. Primary prevention.

# **Words and Expressions**

antidote [	] n. 解毒剂; f	解药		
syrup of ipecac [	] n.	吐根糖浆		
charcoal [	n. 活性碳			
pediatric [	] adj. 小儿科的	þ		
hemoglobin and hematocrit	[		]	血红蛋白和红细胞压积
serum transaminase [		] n.	血	青转氨酶
N-acetylcysteine [	]	n. n-乙醇	t半,	胱氨酸
acetaminophen [	] n.	对乙酰氨	基酌	Ú

Three-year-old Nicole Lyon's mother brings her to the emergency room because Nicole ate "half a bottle of my acetaminophen tablets 15 minutes ago."

17. The nurse ascertains that the bottle originally contained 100 tablets. The nurse's first action should be what?

- A. Have Nicole drink an 8-oz glass of milk.
- B. Give Nicole 30ml of syrup of Ipecac followed by a glass of water.
- C. Insert a nasogastric tube and administer activated charcoal.
- D. Obtain a brief history of events leading up to the ingestion from Mrs. Lyon.
- 18. Nicole is admitted to the pediatric unit for observation. Which laboratory findings should the nurse monitor most closely for changes in Nicole's health status?
  - A. Hemoglobin and hematocrit
  - B. White blood cell count and differential
  - C. Blood gases (pO<sub>2</sub>) . pCO<sub>2</sub>, and pH)
  - D. Serum transaminase levels (SGOT and SGPT)
- 19. Nicole is receiving N-acetylcysteine (Mucomyst) as an antidote to the acetaminophen. To make the drug more palatable for Nicole to drink, the nurse should mix the drug with what fluid?
  - A. Water
  - B. Orange juice
  - C. Milk
  - D. Flavored milkshake

# **Words and Expressions**

hepatitis [		] n. 肝炎
cholecystitis	[	] n. 胆囊炎
cholelithiasis	[	] n. 胆石症
jaundice [		] n. 黄疸

] n. 凝血	素			
] n. 胆囊				
] n. 肺不	张			
] n. 肺炎				
[	] n. 血栓性静脉炎			
] n. 出血				
Josephine Harrod has been admitted to the hospital with hepatitis Type A.				
	] n. 胆囊 ] n. 肺不 ] n. 肺炎 [ ] n. 出血.			

- 20. Which of the following precaution is inappropriate to include in Mrs. Harrod's care?
  - A. Stool and needle isolation
  - B. Special care of linens and food
  - C. Use of a gown and gloves during client contact
  - D. Reverse isolation
- 21. Several months following her hospitalization for hepatitis, Mrs. Harrod reentered the hospital with complains indicative of cholecystitis and cholelithiasis. Because she has an existing jaundice, which of the following tests should be performed prior to surgery?
  - A. Lee-White clotting time
  - B. Bleeding time
  - C. Prothrombin time
  - D. Circulation time
- 22. For which post-op complication is Mrs. Harrod at risk after gallbladder surgery?
  - A. Atelectasis
  - B. Pneumonia
  - C. Hemorrhage
  - D. Thrombophlebitis

# 23. Following surgery, Mrs. Harrod has a nasogastric tube in place with an order to irrigate it prn. What is the rationale for irrigating a post-op client's nasogastric tube?

- A. To remove secretions from the stomach
- B. To decrease abdominal distension
- C. To minimize bleeding
- D. To maintain patency of the tube

# **Words and Expressions**

vertebrae [ ] n. 椎骨;	脊椎
intracranial [ ] adj.	颅内的
capillary permeability [	] n. 毛细血管通透性
cardiopulmonary resuscitation [	] n. 心肺复苏术
carotid [ ] adj. 颈动脉的	
dilate [ ] vt. 使扩大; 使膨	<b>沙胀</b>
vascular tone [	n. 血管紧张度
hemorrhage [ ] n. 出	ш

Allen Spinet, 23 year old, was injured in an automobile accident.

# 24. Of the following sequences, which would be the most appropriate in the immediate post-trauma minutes?

- A. Control the hemorrhage; establish an open airway; stabilize the fractured vertebrae; splint the fractured leg.
- B. Establish an open airway; control the hemorrhage; stabilize the fractured vertebrae; splint the fractured leg.
- C. Establish an open airway; stabilize the fractured vertebrae; control the hemorrhage; splint the fractured leg.

- D. Establish an open airway; control the hemorrhage; splint the fractured leg; stabilize the fractured vertebrae.
- 25. Which is the most important intervention in treating hemorrhage?
  - A. Allay apprehension.
  - B. Give oral fluids.
  - C. Prevent chilling, but don't overheat.
  - D. Restore blood volume.
- 26. Shock causes which of the following?
  - A. A pO<sub>2</sub> greater than 80 mmHg
  - B. A pH less than 7.34
  - C. A pCO<sub>2</sub> less than 45 mmHg
  - D. A decrease in capillary permeability
- 27. If cardiopulmonary resuscitation were performed on Mr. Spinet by 2 persons, which of the following rations of cardiac compression to pulmonary ventilation would be used?
  - A. 1:1
  - B. 5:1
  - C. 15:2
  - D. 20:2
- 28. Effective cardiopulmonary resuscitation would be best indicated by which sign?
  - A. Palpable carotid pulse
  - B. Dilated pupils
  - C. Easily blanched nail beds
  - D. Normal skin color
- 29. What is the primary objective of therapy for Mr. Spinet's shock?
  - A. Maintain adequate blood pressure
  - B. Improve tissue perfusion
  - C. Maintain adequate vascular tone
  - D. Improve kidney function
- 30. Mr. Spinet's injuries include a skull fracture. One of the goals of care for him is to observe for increasing intracranial pressure. Increased intracranial pressure would be indicated by which sign?
  - A. Increased pulse rate and increased blood pressure