VISOKA MEDICINSKA ŠKOLA STRUKOVNIH STUDIJA IZ ĆUPRIJE

ENGLESKI JEZIK

PRAKTIKUM ZA STUDENTE STRUKOVNIH ZDRAVSTVENIH ŠKOLA

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ENGLESKI JEZIK – PRAKTIKUM ZA STUDENTE STRUKOV-NIH ZDRAVSTVENIH ŠKOLA

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Let's Revise!

1. English Alphabet

There are more than 40 distinct sounds in English. Because we have just 26 letters to represent those sounds, most letters stand for more than one sound. The consonant c, for example, is pronounced differently in the three words cook, city, and (combined with h) chop.

1.1 What's the name for a sentence that contains all 26 letters of the alphabet?

That would be a pangram . The best known example is "The quick brown fox jumps over the lazy dog." A more efficient pangram is "Pack my box with five dozen liquor jugs." (In Serbian language the best example would be: "Njoj pljačkom zgrćeš: tuđ CD, VHS, bež fildžan! (33 letters, record!))

1.2 English alphabet

```
Aa Bb Cc Dd Ee Ff Gg Hh
                                              Ιi
                                                      Jί
                                                            Kk Ll Mm
            cee
                  dee
                                  qee
                                       (h)aitch
                                                      jay
                                                             kay
      [bi:]
                 [di:]
                        [i:]
                            [\epsilonf] [dzi:] [(h)\epsilonrtʃ] [\epsilonI]
 [eɪ]
           [si:]
                                                     [dʒeɪ]
                                                             [kei]
                                                                  [21]
                                                                         [em]
Nn Oo Pp Qq Rr Ss Tt Uu Vv
                                                    Ww
                                                            XxYy Zz
                                                    double-u
                                                                  wy(e) zed/zee
                                               vee
[en]
           [pi:] [kju:] [a:/ar] [es]
                                  [ti:]
                                        [ju:]
                                              [vi:] ['dʌbəlju:] [ɛks] [waɪ] [zɛd/zi:]
      [00]
```

Spell the following:

•	Your name and surname:	
•	The name of your street:	
•	The name of your city:	

2. Numbers

2.1 Table of Cardinal Numbers

1	One	11	eleven	21	twenty-one	31	thirty-one
2	Two	12	twelve	22	twenty-two	40	forty
3	three	13	thirteen	23	twenty-three	50	fifty
4	four	14	fourteen	24	twenty-four	60	sixty
5	five	15	fifteen	25	twenty-five	70	seventy
6	Six	16	sixteen	26	twenty-six	80	eighty
7	seven	17	seventeen	27	twenty-seven	90	ninety
8	eight	18	eighteen	28	twenty-eight	100	a/one hundred
9	nine	19	nineteen	29	twenty-nine	1,000	a/one thousand
10	Ten	20	twenty	30	thirty	1,000,000	a/one million

2.1.1 Separation between hundreds and tens

Hundreds and tens are usually separated by 'and' (in American English 'and' is not necessary).

- 110 one hundred and ten
- 1,250 one thousand, two hundred and fifty
- 2,001 two thousand and one

2.1.2 Hundreds

- Use 100 always with 'a' or 'one'.
- 100 a hundred / one hundred
- 'a' can only stand at the beginning of a number.
- 100 a hundred / one hundred
- 2,100 two thousand, one hundred

2.1.3 Thousands and Millions

- Use 1,000 and 1,000,000 always with 'a' or 'one'.
- 1,000 a thousand / one thousand
- 201,000 two hundred and *one* thousand
- Use commas as a separator.
- 57,458,302

2.1.4 The Number 1,000,000,000

In English this number is a *billion*. This is very tricky for nations where 'a billion' has 12 zeros. 1,000,000,000,000 in English, however, is a *trillion*. (Broj sa devet nula se na engleskom kaže *billion*, dok je taj broj u srpskom jeziku *milijarda*. Naš broj bilion, koji ima 12 nula se na engleskom zove *trillion*.)

2.2 Table of Ordinal Numbers

1	st	first	11 tl	eleventh	21	st	twenty-first	31	st	thirty-first
2	nd	second	12 tl	n twelfth	22	nd	twenty- second	40	th	fortieth
3	rd	third	13 tl	thirteenth	23	rd	twenty-third	50	th	fiftieth
4	th	fourth	14 tl	fourteenth	24	th	twenty- fourth	60	th	sixtieth
5	th	fifth	15 tl	fifteenth	25	th	twenty-fifth	70	th	seventieth
6	th	sixth	16 tl	sixteenth	26	th	twenty-sixth	80	th	eightieth
7	th	seventh	17 tl	seventeenth	27	th	twenty- seventh	90	th	ninetieth
8	th	eighth	18 tl	n eighteenth	28	th	twenty- eighth	100	th	one hundredth
9	th	ninth	19 tl	nineteenth	29	th	twenty-ninth	1,000	th	one thousandth
10	th	tenth	20 tl	twentieth	30	th	thirtieth	1,000,000	th	one millionth

2.2.1 Spelling of Ordinal Numbers

- Just add *th* to the cardinal number
- four fourth
- eleven eleventh

Exceptions:

- one first
- two second
- three third
- five fifth
- eight eighth
- nine ninth
- twelve twelfth

In compound ordinal numbers, note that only the last figure is written as an ordinal number

- 421st = four hundred and twenty-first
- 5,111th = five thousand, one hundred and eleventh
- first = 1st
- second = 2nd
- third = 3rd
- fourth = 4th
- twenty-sixth = 26th
- hundred and first = 101^{st}

2.2.2 Titles

In names for kings and queens, ordinal numbers are written in Roman numbers. In spoken English, the definite article is used before the ordinal number.

- Charles II Charles the Second
- Edward VI Edward the Sixth
- Henry VIII Henry the Eighth

Exercises:

- Say your telephone number
- Say the following telephone numbers:
- 30611, 9471122,
- 0865688592, 844042, 56321,
- 0714059529, 358002

Find the missing number:

- + twenty = seventy-seven
- A hundred = sixty

3. Months and days of the week

Note that the months and days of the week are always capitalized. If you do not want to write the whole words, you can use the abbreviations. In British English, abbreviations are usually written without full stops (Apr), full stops are normal, however, in American English (Apr.)

Month	Abbriviation	Month	Abbriviation
January	Jan	July	/
February	Feb	August	Aug
March	Mar	September	Sept
April	Apr	October	Oct
May	/	November	Nov
June	/	December	Dec

Day	Abbreviation
Monday	Mon
Tuesday	Tue
Wednesday	Wed
Thursday	Thu
Friday	Fri
Saturday	Sat
Sunday	Sun

3.1 Seasons of the year:

Spring, summer, autumn, winter

Write the month which follows:

•	March	
•	September	
•	January	
•	June	
•	July	
•	Anril	

Complete:

01/05	1 st May	the first of May
• 29/02		
• 23/12		
• 22/04		
• 31/10		
15/03		

3.2 What time is it? / What is the time?

There are two common ways of telling the time

Say the hour first and then the minutes. (Hour + Minutes)

- 6:25 six twenty-five
- 8:05 eight O-five
- 9:11 nine eleven
- 2:34 two thirty-four

Say the minutes first and then the hour. (Minutes + PAST / TO + Hour)

For minutes 1-30 we use PAST after the minutes For minutes 31-59 we use TO after the minutes

- 11:20 twenty past eleven
- 4:18 eighteen past four
- 8:51 nine to nine
- 2:59 one to three
- 2:35 twenty-five to three

When it is 15 minutes past the hour we normally say: a quarter past

• 7:15 - a quarter past seven

When it is 15 minutes before the hour we normally say: a quarter to

• 12:45 - a quarter to one

When it is 30 minutes past the hour we normally say: half past

• 3:30 - half past three (but we can also say three-thirty)

3.2.1 O'clock

We use o'clock when there are NO minutes.

- 10:00 ten o'clock
- 5:00 five o'clock
- 1:00 one o'clock

Sometimes it is written as 9 o'clock (the number + o'clock)

3.2.2 12:00

For 12:00 there are four expressions in English:

- twelve o'clock
- midday = noon
- midnight

3.2.3 Giving the Time

We use It is or It's to respond to the questions that ask for the time right now.

- It is half past five (5:30).
- It's ten to twelve (11:50)

3.2.4 AM vs. PM

We don't normally use the 24-hour clock in English. We use a.m. (am) for the morning and p.m. (pm) for the afternoon and night.

3am = Three o'clock in the morning.

3pm = Three o'clock in the afternoon.

Say the time (use *It's*):

- 16.35
- 09.05
- 13.45
- 12.00
- 08.55
- 18.30

4. Prepositions of time: at, in, on

We use

- at for a PRECISE TIME
- in for MONTHS, YEARS, CENTURIES and LONG PERIODS
- on for DAYS and DATES

•

at	in	on
PRECISE TIME	MONTHS, YEARS, CENTURIES and LONG PERIODS	DAYS and DATES
at 3 o'clock	in May	on Sunday
at 10.30am	in summer	on Tuesdays
at noon	in the summer	on 6 March
at dinnertime	in 1990	on 25 Dec. 2010
at bedtime	in the 1990s	on Christmas Day

at sunrise	in the next century	on Independence Day
at sunset	in the Ice Age	on my birthday
At the mo- ment	in the past/future	on New Year's Eve

Put the correct prepositions:

1.	I have a meeting	9am.	
2.	The shop closes	midnight.	
3.	Jane went home	lunchtime	
4.	In England, it often	snows	December.
5.	Do you think we w	ill go to Jupiter _	the future?
6.	There should be a l	ot of progress	the next century.
7.	Do you work	Mondays?	
8.	Her birthday is	20 Novemb	er.
9.	Where will you be	New Year	r's Day?

Notice the use of the preposition of time at in the following standard expressions:

Expressions	Examples
at night	The stars shine at night.
at the weekend*	I don't usually work at the weekend.
at Christmas*/Easter	I stay with my family at Christmas.
at the same time	We finished the test at the same time.
at present	He's not home at present. Try later.

Notice the use of the prepositions of time in and on in these common expressions:

in	on
in the morning	on Tuesday morning
in the mornings	on Saturday mornings
in the afternoon(s)	on Sunday afternoons
in the evening(s)	on Monday evening

When we say last, next, every, this we do not also use at, in, on

- I went to London **last** June. (*not* in last June)
- He's coming back **next** Tuesday. (**not** on next Tuesday)
- I go home every Easter. (not at every Easter)
- We'll call you **this** evening. (*not* in this evening)

Put the correct preposition:

- ____ spring,
- midnight,
- ____ Monday,
- 1969
- 06.00pm,
- ____ 1st May,
- March,
- ____ the evening,
- night,
- weekend,
- Christmas,
- ____ my birthday,
- ____ New Year's Eve

Reading texts and vocabulary

1. The Hospital

1. Match each job with the given descriptions.

- 7. designs special exercises for patients?
- 8. studies blood disorders?
- 9. treats bones?
- 10. specializes in the heart?
- 11. deals with sick children?
- 12. treats disorders of the nervous system?

Pathology	Renal Unit	Neurology
Cardiology	Pharmacy	Paediatrics
Physiotherapy	Orthopaedics	Dermatology
Obstetrics	Surgery	Haemathology

2. It's my job

2.1 A Job Interview

Interviewer: OK Rachel, let's start the interview with a few questions. Your CV says that you are working at City Hospital.

Rachel: Yes, in the operating theatres.

I: Are you a fully-qualified scrub nurse?

R: Not yet. At the moment I am doing a part-time course and working at the same time. I'm preparing for the exams, which are next month. It's hard, especially when I'm working a night shift and going to lectures next day.

I: Tell us about your job. What do you do every day?

R: Well, I assist the surgeons. I prepare the instruments for surgery and I help with the operations.

I: What do you like best about being a scrub nurse?

R: Well I like watching operations, but it's the contact with the patients that's most rewarding.

I: So, why are you applying for a new job?

R: Well, I am very happy in my job, but I want more responsibility.

- 1. After reading the interview, answer the questions.
- 1. Where is Rachel working now?
- 2. Is she a fully-qualified scrub nurse?
- 3. What is she doing at the moment?
- 4. Which part of the hospital does she work in?
- 5. What does she do every day?
- 6. What does she like best about her work?

- 7. Why is she looking for a new job?
- **2.** *Translate the following words and underline them in the text.*
 - apply for a job
 - go to lectures
 - work night shifts
 - a fully-qualified nurse
 - a part-time job
 - a rewarding job

2.2 A Theatre Nurse (Matthew Binns)

I'm a theatre nurse. When I start a shift, my first duty is to prepare the theatre. My team and I dust everything and check that all the electrical equipment is working. We make sure the table's set up, and that we have everything we need such as gowns, gloves, soaps and brushes, waste bags, and stocks of swabs. Than I check the operation list and prepare the equipment tray for the first one. I count all the swabs, sutures, blades – anything that could be left inside a patient – and write it all up on the whiteboard.

Our patients are all unconscious, and it's part of our job to make sure they are not injured or uncomfortable when they are on the operating table. During the operation you need to anticipate what the surgeon will need next. They generally work with forceps and scalpel, and you always need a right type of swab ready. With experience, you get to know what clamp or blade will be needed next.

At the end of the operation, we count in all the equipment that's been used, clean up the patient, and take them to the recovery room. Then it's back to the theatre to wipe down all surfaces and start all over again.

The basic job stays the same, but technology brings in new things. About half our operations here use keyhole surgery, which means we have to operate TV screens and other equipment. I've also been trained to use the laser machine, which is used for cutting or removing tissue.

1. Write down the items that Matthew mentions.

cleaning	cutting	dealing with bleeding	clothes	other

2.3 A Triage Nurse (Heidi Vettraino)

A repetitive job is my idea of a nightmare, which is why I work in A&E. It's stressful, sometimes shocking, and often very upsetting, but I wouldn't change it for anything.

I specialize in emergency triage. 'Triage' means 'sorting' and that's what I do. I sort out patients in A&E according to the nature and severity of their illness so that the doctors see the most severe cases first and we don't waste precious time on non-emergencies. You could say that's like specializing in everything. You don't know what's going to pop up next – it could be an accident with multiple Fx, a sick baby, or a CVA. The day before yesterday a farming accident came in – a man had cut his hand off with a chainsaw. When the ambulance brought the patient in, he was haemorrhaging badly and we had to open up an airway and get him on a ventilator immediately. He's ok. He's in ICU, but not on the critical list any more. That was the same day a woman came in complaining of terrible pain in her feet. I was the S/N on duty and I categorized her as a non-emergency. She sat waiting for four hours before finaly seeing the SHO. You'll never guess what the problem was. Her shoes were too tight!

The best thing about A&E work is the people you work with. Everyone pulls together, we're all equal, and everyone shares the same sense of humour, which is essential. Sometimes you've got to see the funny side or give up all hope for human beings. Last week, for example, an ambulance brought a man in who was unable to open his eyes. Being short-sighted, he had reached for his eye drops and didn't see that he had picked up a tube of superglue instead. Poor man! We bathed his eyes for an hour and very slowly separated his eyelids. He was able to laugh about it with the A&E staff

afterwards, but in the future he won't be keeping his medicines in his desk drawer.

- 1. Answer the questions about the text:
 - 1. Why does Heidi not mind the stress of her job?
 - 2. Why is 'triage nurse' a suitable job title?
 - 3. What is Heidie's rank?
 - 4. What is the A&E doctor's rank?
 - 5. What does Heidi like the best about the job?
 - 6. What will the patient with the eye problem not be keeping his medicines in his desk drawer in future?

3. Ambulance	
 1. Mrs. Benson is admitted to hospital. Listen to t and decide who is speaking to her in each one. W a receptionist a consultant a paramedic a sister a radiologist 	•
 2. Listen again and decide if these sentences are to Mrs. Benson has had a fall. This is not Mrs. Benson's first x-ray. Mrs. Benson cannot find the toilet. She has a heart problem. The consultant sends her home. Mrs. Benson's appointment is next week. 	
 3. Find out what these words mean: Ambulance To have a closer look Headache Bedpan Blood pressure To prescribe To make an appointment Outpatient(s) 	

3.1 Air ambulance: Rescue from the Air

When you cannot move treatment quickly to sick people, you have to move sick people quickly to treatment. The problem is that when someone is severly injured, movement can kill and so anything that can both speed up the journey and minimize the shock is a life-saver. This is why, over the hundred years ago, a long time before the development of aircraft, someone came up with the design for an 'air ambulance'. The idea was to put wounded people on a stretcher which was held in the air by balloons and pulled along by horses.

Warfare has encouraged progress in ambulance technology. It is expensive and wasteful to let soldiers die on a battlefield and saving their lives justifies the expense of using aircraft (particularly helicopters) to transport casualties to hospital. In fact, the first time a helicopter was used for a medical rescue was in Burma in 1945 by the American military. A soldier in a jungle-covered mountain accidentally shot himself with a machine gun. There were no medics and the air was so wild that it would have taken ten days for a rescue party to reach the wounded man. A Sikorsky YR-4 helicopter – very basic by modern standards – was sent out. It had no radio and navigated by flying low over the treetops but the pilot completed his mission and the soldier's life was saved.

Even today, helicopters are limited by weather and darkness. Unlike airoplanes, which have radar and computers, many helicopters have only essential flight equipment and pilots have to fly VFR (Visual Flight Rules) which means they can only fly when they can see. However, the great value of a helicopter is that it can land and take off vertically and provide speed and comfort, which are not luxuries when it comes to saving lives and a helicopter can make a huge difference in a rural area where response time is normally slow. Air ambulance can increase the chances of survival of patients whose injuries are severe but survivable; an important factor to consider when sending one out.

1. Choose the correct answer:

- 1. The idea of an air ambulance came from the need to
 - a. limit a patient's movement
 - b. move treatment fast to sick people
 - c. move patients fast but gently.

- 2. Letting wounded soldiers die is
 - a. cheaper than evacuating them by helicopter
 - b. economically necessary
 - c. inefficient.
- 3. The first medical rescue by helicopter was
 - a. a response to an accident
 - b. a military exercise
 - c. after a battle.
- 4. The equipment in a Sikorsky YR-4 helicopter is
 - a. elementary
 - b. sophisticated
 - c. complex
- 5. The main problem for helicopter pilots is that they
 - a. cannot see where they are flying
 - b. cannot fly when they cannot see
 - c. cannot use VFR
- 6. Air ambulances are best employed for patients who
 - a. are non-emergencies
 - b. will probably die
 - c. may live

4. Nursing profession

Florence Nightingale (1820-1910) was the founder of modern nursing. She dramatically improved conditions for soldiers infield hospitals, and educated people about the importance of hygiene. She saved thousands of lives and became very famous. She later started her own training college for nurses, and wrote many books on nursing.

The Nursing Profession

One hundred and fifty years ago, nurses were unpaid, untrained, and unpopular, but then Florence Nightingale made nursing into a profession. The methods she introduced in the 1850s were copied all over the world, and now nursing is a career with a three- or four-year training, qualifications, grades, unions, and pensions.

In Britain, every nurse is on a grade. The grade depends on experience and skills, and each grade has different responsibilities and pay. On the bottom grades are unqualified auxiliary nurses, who do the routine work on hospital wards. On the top grades are nursing officers, who are usually administrators.

Auxiliary nurses are on the bottom grades, but student nurses get the lowest pay. However students don't stay at the bottom of the pay scale forever. When they qualify they start working on the middle grade. As they get experience, they can get promotion and move up the ranks to become staff nurse, than sister (charge nurse if a man), and perhaps eventually nursing officer. Many nurses work shifts, and often they work overtime to earn more money. After basic training, many nurses choose to further study and become specialists. Nurses can specialize in many different fields – there are triage nurses working in Casualty, and psychiatric nurses who treat the mentally ill. There are health visitors who visit patients in their own homes, practice nurses working in GP's surgeries, and midwives who deliver babies.

Many of them say they do not get enough pay and respect for the work they do. They say that the work is physically and mentally hard, that they work long hours and get very tired. But they also say that there are many great rewards which have nothing to do with money.

Now, nursing is a career with a three or four year training, qualifications, grades, unions, and pensions.

Ι.	Read	the articl	e and o	decide	11 t	these sei	ntences	are	true (Ι	or (talse (F):
----	------	------------	---------	--------	------	-----------	---------	-----	--------	---	------	---------	---	----

	1.	The more responsibility you have, the higher your grade	_
	2.	Nursing officers are the same as auxiliary nurses.	_
	3.	Students are paid less than auxiliary nurses.	_
	4.	A charge nurse is a man.	_
	5.	Many nurses say that the job is rewarding but the pay	
	6.	is low.	_
2.		words in the article with these meanings: Exams and courses that you have taken	_
	b.	Money that you will receive when you are old.	_
	c.	Similar work that you have done before	_
	d.	Special abilities	_
	e.	Levels of pay	_
	f.	Extra hours you can work to earn more money.	_

g.	Study and practice to learn how to do a job
11.	More advanced learning
3. List	the names of the specialized nurses.
a.	
b.	
c.	
5 Ц	osnital Admission
J. 110	ospital Admission
let. I haknow very work range very work range very work range very work range	2: It's not due until next month, but when I was washing up this g there was a little blood. It worried me. Then I got these pains. 3: I was working high up on the ladder. My foot slipped and I fell. I head but there is no blood and I don't feel too bad. 4: I was working by the river, and I think I stepped on it and it bit on't know what type it was but it was long and silver with a black to the internet and I'm sure I've got cancer. Do you think I'm or die?
1. Matc	th the patient's conditions with the patients:
a.	Pregnancy
b.	Snake bite
c. d.	Concussion Chickenpox
e.	Poisoning

1. dietary	a. care
2. hearing	b. consent
3. informed	c. difficulties
4. medical	d. effects
5. overnight	e. examination
6. physical	f. history
7. presenting	g. infection
8. round-the-clock	h. requirements
9. side	i. stay
10. wound	j. symptoms

2. Complete this case history with the above collocations.

			s later went to his doc-
tor with	of jaw discomfo	ort. It is more to	han ten years since his
last tetanus booster	and the patient h	nas no significa	nt There
were also no signific	cant findings fron	n a	of head and neck and
his lungs were clear.			
The diagnosis was '	tetanus with seco	ndary	so the wound was
cleaned and hydrog	en peroxide appli	ed. The patient	s's doctor referred him
for an i	n hospital for obse	ervation.	
After the treatment	was explained to	him, the patier	at signed a form which
gave his	_ and he was the	en given anti-te	tanus immunoglobulin.
He responded well	and there were n		or complications. The
patient said that bed	cause he was a ve	egetarian, he ha	nd special
and could not eat he	ospital food. Also	, he lived with	his mother who is se-
verely disabled, wir	th, a	and needs	Mr Peterson
asked to be discharg	ed and Dr Hashim	gave his autho	rization.

6. Patient Record

- 1. Find the meanings for the given words and complete the sentences:
 - a triage nurse
 - an initial assessment
 - life-threatening
 - registration
 - treatment
 - a priority
 - waiting room
 - cubicle

1.	Take a seat in the	•
2.	The first nurse you meet will be the specialist	
3.	called	
4.	This nurse will make	of you
	problem.	
5.	This helps decide who is	_•

- 6. A patient with a ______ condition will see a doctor immediately.
- 7. A nurse will get personal details from you and fill in a hospital form.
- 8. When there is a free ______, a doctor will see you.9. The doctor will decide on the ______.
- 2. Which patient is recorded on this form?

PATIENT RECO	R D
Surname First name DOB Gender Occupation Marital status Next of kin Contact no. Smoking intake Alcohol intake Reason for admission Medical history Allergies GP	Grady Jim 2/3/50 M retired widowed son 07765 432178 n/a 30 units per week snake bite high blood pressure none
	Dr Parkinson, Central Surgery

JobBad reactions, for example to certain medications
Family doctor
Closest relative
Closest relative The amount something you eat
Date of birth
Male/female
Male/female Past illnesses and injuries Married/single/divorced/widowed Not applicable (not a question for this patient)
Married/gingle/diverged/widewed
Not applicable (not a greation for this noticet)
. Not applicable (not a question for this patient)
. In each day/week etc.
. Number
en to the nurse get personal details from a patient. As you listen, con ne form.
PATIENT RECORD
Surname
First name DOB
Gender Gender
Occupation
Marital status
Next of kin
Contact no.
Smoking intake Alcohol intake
Reason for admission
Medical history
Allergies
GP
Family history
Mental illnesses
Diabetes Tuborgularia
Tuberculosis
HIV/AIDS

3. Find words and abbreviations in the patient record with these meaning:

4. Read this summary about Mustapha Hussein and find three mistakes:

Mustapha Hussein was admitted with possible concussion after falling from a ladder and hitting his head. Mr. Hussein was born in 1982. He is divorced,

and works as a painter. His next of kin is his brother, Yusuf. He can be contacted on 07709-401229. Mr. Hussein smokes 40 cigarettes a day. He does not drink alcohol. He is not allergic to anything. There is a family history of diabetes on his father's side.

7. Bad Handwriting

There is an old joke that doctors go to school to learn how to write badly, and nurses go to school to learn how to read doctor's handwriting. There's truth in the joke – computer analysis of the handwriting of medical staff shows that doctor's writing is a lot worse than that of nurses and administrative staff. Maybe it's because doctors are always under pressure of time that they write very fast. The habit starts when they are medical students and gets worse as time passes.

- 1. What does the old joke of the doctors' handwriting say?
- 2. Why do doctors write a lot worse than nurses and administrative staff?
- 3. When does the habit start?

Computer analyses show that generally, medical staff are careful with numbers. However, they tend to form letters of the alphabet badly. When drug names look very similar, bad handwriting can mean patients get the wrong medicine. A young girl nearly died when she was given *Mathimazole* instead of *Metolazone* (one is for high blood pressure and the other is for thyroid problems). And in 1999, an American cardiologist, wrote a prescription so badly that the pharmacist gave a patient the wrong medicine. This time the patient did die and the court fined the doctor 225,000 US dollars.

- 1. What do computer analyses show?
- 2. What happened with an American cardiologist in 1999?

Recently, researchers studied 50 patient progress notes. They found that they could not read 16% of the words. The misunderstandings that this causes can mean that a patient is given the wrong blood, or that surgeon amputates the wrong limb. Fatal errors, of course, make news, but studies show that every year hundreds of thousands of mistakes are made in hospitals around the world, and a lot of them are because of bad handwriting or ab-

breviations which nobody understands. Bad handwriting also causes delays, which are expensive and wasteful.

1. What are the fatal errors caused by doctors' bad handwriting?

There are many technological solutions for the problem, and though digital technology cannot improve handwriting, it can improve the situation. At London's Charing Cross Hospital, for example, patients wear barcodes (the same as in a supermarket) on their wrists or ankles. Staff use the bar codes along with hand-held computers to get accurate, clear and easy-to-read information.

1. How did Charing Cross Hospital try to solve the problem?

 1. Read the article and decide if these sentences are true (T) or false (F): Nurses study doctor's handwriting at school. Doctors generally write numbers more carefully than words. Methimazole and Metolazone are used for different conditions A pharmacist wrote a prescription and the patient died. Researchers could understand 84% of doctor's notes. Many hospitals use abbreviations in order to avoid mistakes. At Charing Cross Hospital, staff carry computers around.
2. Find words in the article to match these definitions:
 Non-medical people who work in hospital offices Written instruction on what drug to give a patient Made somebody pay money as a punishment. To cut off part of the body An arm or leg Mistakes that result in death
7.1 Abbreviations
1. Make the correct phrase to match the abbreviations in the sentences below.
abnormal activity acute adverse by central detected disease drug failure heart heart left level mouth nervous nothing pulmonary

rate reaction renal system ventricle alcohol nil (= nothing) coronary physical ambolism complaining of ultrasound
1. This patient's notes say NBM so don't give him any food
2. This disease affects the CNS, causing speech, movement, and memory problems
3. The tests showed NAD, so this patient can go home
4. Damage to the kidney has caused ARF
5. Mrs Welsh's breathing is bad. She may have a PE
6. Smoking is a risk factor for CHD
7. The LV is enlarged so the heart is not pumping effectively
8. The patient suffered an ADR after being put on new medication.
9. HR is now back to 70
10. He has an office job and takes no exercise, so his PAL is very low.

8. A Surprise Passenger

Taxi drivers in Bangkok are now being trained to help women give birth. An estimated 300-400 women in the city give birth in taxes or tuktuks on the way to hospital each year.

British taxi driver, Clive Lawrence, became a midwife for an hour when a passenger gave birth to a baby in the back of his taxi.

Asha Gemechu's baby was due in a month, but when her contractions started she called for a taxi to take her to hospital. Mr. Lawrence answered the call.

The expectant mum was in the taxi for ten minutes when she realized that things were happening too fast. The baby was not going to wait. Its head appeared, and Mr. Lawrence stopped the taxi to help with the birth.

Mr. Lawrence said, "I was there when my kids were born, so this was not completely new for me. I spoke to a nurse on the taxi radio and she gave me instructions – I only did what she told me. There's nothing special about that. One minute I had one passenger, than I had two, but there's no extra charge.!"

A midwife at the hospital said, "Giving birth on the way to hospital doesn't happen often, but if you are there when it does, just support the baby's head and guide it out — don't pull. Than clean the baby's nose and mouth, but don't cut the umbilical cord — just lay the baby on the mother's chest. Dry the baby with a clean towel or cloth, gently rub its back, than cover mum and baby with a dry blanket to keep them both warm, and wait for medical help to arrive."

"Clive was wonderful," the mother said later, "he did everything right." Asha is naming the baby Mohammed Clive. Mother and baby are both doing well.

- 1. Read the text and answer the questions.
 - 1. Was this Clive's first experience of a birth?
 - 2. Who gave the instructions to Clive?
 - 3. Who is Mohammed Clive?
 - 4. How is the baby now?
- 2. Write down the midwife's instructions. List them first as positive (DOs) and then as negative instruction's (DON'Ts).

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

3. Complete each sentence with FIRST AID words from the box:

keep

squeeze

	11 /	•	•	
	check for	make sure	sterilize	
	immerse	puncture	swab	
	immobilize	remove	treat	
_		1		1
1.		a clean, sharp needle	with alcohol.	
2.		there is no glass or		in the
	wound.			
3.	Use the needle to	th	e blister.	
4.	Don't	burnt clothir	ıg.	
5.		the main artery if neo	cessary.	
		the injured person ly		
7.			art once the bleeding	ng has
	stopped.			
8.		the person for shock.		
9.	Don't	severe large bur	ns in cold water.	
10		signs of circulation	n.	
11	·	with Iodine or rubb	oing alcohol.	
12	·	_ antibiotic ointme	nt and cover with th	e ban-
	dage.			
		rse receiving instruct		lic and
give the	-	n 1 to 5) to the followi	ng expressions.	
•	AED			
•	Check the pulse			
•	Set up IV			
•	Mouth-to-mouth			

- 5. Listen again and underline the correct option in ITALICS.
 - 1. The nurse gives *two /three* breaths into the patient's mouth.
 - 2. The patient has had a *stroke /cardiac arrest*.

Push down and release

3. The paramedic counts up to t**ree / four** after each push down on the chest.

- 4. The nurse pushes down on the chest *fifteen /sixteen* times.
- 5. They set the charge on the defibrillator at 100/200.
- 6. The nurse applies the pads on *each side of / above and below* the heart.
- 7. The patient starts to respond after *the first / the second* charge from the defibrillator.
- 8. The patient is given *Lidocaine / Atropine*.
- 9. The dosage is 200 ml over one minute / 100 ml over two minutes.

6. Match each sentence with a verb from the list:

1. Check 1. him CPR

2. Give 2. him mouth-to-mouth

3. Give 3. his head

4. Support 4. his nose closed

5. Hold 5. your hand on his chest

6. Press 6. clear of his body

7. Put 7. the buttons and hold for two seconds

8. Repeat9. Set up8. his pulse again9. the procedure

10. Stand 10. an IV

9. Wheelchair

Modern wheelchairs are a big improvement on the first wheelchairs, which were just wheelbarrows like the ones we use in the garden. Professor Stephen Hawking's wheelchair, for example, is a vehicle, an office, and a domestic servant, all in one.

The first real wheelchair was owned by King Philip of Spain in the sixteenth century. It had the latest technology – removable arm rests and leg rests – and was made of wood. Modern wheelchairs are made from the same strong, light metal as aircraft, and electric engines mean that users don't need to use their arms or have someone to push.

Wheelchair design made a big jump forward with the invention of a computer program that responds to voice commands. For users who cannot speak, computer technology also makes it possible to manoeuvre a machine by small movements of the head, hand, tongue, and breath.

Some things that able-bodied people do without thinking can be a major problem for disabled people, for example climbing stairs, entering and leaving buildings, and using toilets. A wheelchair can either help or

make the problem worse. So before choosing a wheelchair there are many questions you have to ask: Will the wheelchair be self-propelled or manual? Which is more important, manoeuvrability or stability? How do you get in or out of it?

The iBOT claims to solve many of the problems of standard wheel-chairs. It is a highly advanced, all-purpose wheelchair that can travel upstairs, raise the user to reach the highest shelves, and balance on two wheels in the shower. It is great fun to use, but beware the price – the iBOT costs as much as a luxury car.

- 1. Read the text and answer the questions.
 - 1. What material was the first wheelchair made of?
 - 2. What are modern wheelchairs made of?
 - 3. What difference does an electric engine make?
 - 4. Apart from your arms, what can you use to control a wheelchair?
 - 5. What three things can an iBOT do that an ordinary wheelchair can't?
- 2. Find words in the text with these meanings.

•	The place you put your arms	
	~ .	

- Orders
- Not disabled
- Moved by the user's own power _____
- How easy it is to move around
- That does everything _____

10. Pain

1. Read the dialogues.

Α.

Nurse: How are you today, Kath? Are you still in pain? Patient: Well, there's pain around my stomach. It's quite bad.

Nurse: What kind of pain is it?
Patient: It's a burning pain.
Nurse: Do you always have it?
Patient: It never goes away. Never.

Nurse: Is it getting worse?

Patient: No, it's staying about the same.

В.

Nurse: How's the pain today, Emir?

Patient: It's much better, thanks. I have a slight pain, just here

in my right side, but it's a lot less painful than yesterday.

Nurse: How often do you get the pain?

Patient: Only every now and again – it comes and goes.

C.

Nurse: Do you still have a headache?

Patient: Yes, I've got this throbbing pain in my head.

Nurse: Whereabouts?

Patient: In the forehead, right between my eyes.

Nurse: Does it feel the same all the time?

Patient: No, it changes. Sometimes it's not too bad, but it gets a

bit worse at night.

Nurse: And it gets more severe now, is it?

Patient: A little bit, yes.

Nurse: I'll get you some painkillers.

D.

Nurse: So, you're having pains in your arm.

Patient: Yes, I keep getting this terrible pain down my left arm.

It starts at the shoulder and shoots down to my hand.

Nurse: Is this all the time?

Patient: No, but most of the time, it's agonizing when it hap-

pens.

Nurse: When did this start?

Patient: It started yesterday, but it's much more severe today.

Nurse: We'd better take a look...

- 2. Locate the pain in each text, and name the types of the pain the patients are experiencing and the time it happens.
 - A _____
 - B_____
 - C_____
 - D

3. Match the types of pain with their definitions:

 A throbbing pain 	a) feels like it is eating you
2. A sharp pain	b) travels fast along part of your
	body
3. A burning pain	c) is steady and not too painful
4. A stabbing pain	d) feels like a muscle is being
	squeezed
5. A shooting pain	e) feels like something sharp is
	stuck into you
6. A dull ache	f) comes and goes rhythmically
7. A gnawing pain	g) feels like fire
8. A cramping pain	h) is strong and sudden

10.1 Case study – a head injury

Katie Martin is a nine-year old female who was in a car crash. At the scene her Glasgow coma scale was 3. She was intubated and transported by helicopter to hospital. She was taken to the intensive care unit due to her intracranial haemorrhage which 24 hours later resulted in evacuation. She was placed on a ventilator and a trachestomy was performed. Katie's preoperative diagnosis was left frontal haemorrhage contusion and multiple skull fracture. She had a left frontal craniotomy with evacuation of the intracerebral haematoma. The dural tear and skull fracture were repaired. Additionally she suffered lacerations to the liver, face, left eyelid, and a right femur fracture. Four months after the accident, her mental and physical state have improved, as outlined before.

A. Katie is able to reposition herself in bed. She can ambulate 10-15 feet with maximal assistant but locomotes in a wheelchair. She will need physical therapy to improve coordination and balance. She requires moderate assistance transferring in and out of the bed, chair, and car. Her hearing is adequate but she has lost the vision in her left eye. She is unable to write, but can hold a pen, so she will need physical therapy to restore her fine motor coordination and strength.

B. She needs assistance for grooming an hygiene care. She will need occupational therapy to help restore her dressing, grooming, and hygiene skills. She needs assistance using a toilet. Katie shows little interest in food, but feeds herself with small bites and has a G-tube for supplemental

nutrition. She has moderate problems with both her bladder and bowel management.

- C. Katie's frontal lobe syndrome has left her unable to produce abstract reasoning, logical concept formation, and planning. She is no longer spontaneous and creative. She does not posses the judgement and insight required to make safe or reasonable social and personal decisions. Her memory has been compromised for both auditory and visual processing of stimuli and retrieval of information. Although she is alert, she cannot sustain concentration sufficiently in order to learn. She is able to count but has difficulty identifying objects. She can follow simple commands.
- D. She is more alert and oriented to person and can identify significant relationships. Katie has a basic understanding of simple conversations, but cannot produce or comprehend abstract thoughts. She is capable of expressing her basic needs. She is uncooperative and easily frustrated. She cries easily and shouts obscenities without provocation.
- E. Katie is emotional and cries frequently for brief periods of time for no particular reason, but is easily redirected. She argues because of her poor ability to overcome frustration and delay gratification. Katie is unaware of the extent of her impairment. It is predicted that she will become depressed and angry as she gains insight. Katie does not initiate recreational activities and entertainment.
- 1. Circle the injuries Katie sustained.
 - 1. a fractured skull
 - 2. a broken arm
 - 3. chest injury
 - 4. a broken leg
 - 5. internal injuries

2. Match the headings with paragraphs A-E.	
1. Cognitive skills	
2. Psychosocial	
3. Communication	
4. Physical functioning and mobility	
5. Personal and self care	

10.2 Vocabulary - Phrasal verbs

I've had acne since I was thirteen. Sometimes it is better and sometimes worse, but it never goes away completely. I know that the next time I need to look my best I'll **break out** in nasty spots. I've tried out every product on the market, but they've all just been a waste of money. Is there a natural way to **deal with** acne?

Acne happens when excess sebum – the skin's natural oil – blocks your pores. As skin cells **die off**, they also clog the pores, allowing bacteria to **build up**. This forms an open 'blackhead', or a covered 'whitehead'.

As far as food goes, you don't need to **cut out** fat from your diet altogether, but if you can **cut down on** deep-fried food, it should help.

Wash your face gently twice daily with a mild soap, taking care to **rinse** it **off.** If you wear make up, make sure you **take** it **off** completely at night. And don't squeeze spots! If you burst a pimple, it may **turn into** a deep and painful cyst.

1. Match the bold verbs in the text with these meanings.
1. to take action to solve a problem
2. to collect in a place
3. to suddenly have marks, spots, etc. cover an area of skin
4. to eat or do less of something
5. to remove something that you are wearing
6. to remove something using clean water
7. to stop eating or doing something
8. to die, one by one
9. To become something different

11. Symptoms

1.	Transi	late t	he j	oli	lowing	g syn	ıptoms.
----	--------	--------	------	-----	--------	-------	---------

•	a rash
•	a bruise
•	constipation
•	a cough
•	cramp

•	deformity
•	dizziness
•	itch
•	a lump
•	nausea
•	numb
•	vomit
•	sneeze
•	a sore throat
•	spots
•	swell
_	acho

11.1 Mystery Syndromes

When you are ill, you expect your doctor to tell you what you have, and then to treat you. But sometimes people have symptoms whose cause is not understood, and for these people it can be difficult or impossible to get treatment.

The main symptom of Chronic Fatigue Syndrome (CFS) is an overwhelming feeling of tiredness. The tiredness is so disabling that it is impossible for the sufferer to continue normal physical and mental activities. Other symptoms include muscle aches and pains, poor sleep, loss of appetite, a recurrent sore throat, and swollen glands in the neck. Sufferers often undergo many tests for known diseases, which prove negative, and many feel that doctors see them as hypochondriacs.

After the Gulf War of 1991, tens of thousands of ex-soldiers suffered chronic illnesses which doctors still cannot explain. Symptoms include dizziness, numbness in the arms, rashes, severe headaches, mood swings, and persistent, extreme tiredness. The cause remains a mystery, but the symptoms have been given the name Gulf War Syndrome. Some soldiers believe they may have been exposed to chemical weapons without knowing, and others blame the vaccinations they were given before they went to war. Military officials say that Gulf War Syndrome is not a real illness. There is no doubt the ex-soldiers are ill, they say, but their symptoms are simply the result of stress.

Maybe one day the cause of these syndromes will be known and will be treatable. But for people like ex-soldier Dave Harries, the first step is

for their condition to be recognized by the medical profession. Then people will believe that their symptoms are not imaginary.

1. Read	the article and decide if these sentences are true (T) or false (F):	
1.	CFS is caused by the virus.	
2.	CFS sufferers cannot lead a normal life.	
3.	Some doctors believe CFS sufferers are not really ill.	
4.	Gulf War Syndrome sufferers were attacked with chemicals.	
5.	They were vaccinated against the syndrome.	
6.	The army officially says that stress caused their illness.	

2. Tick the things that each syndrome affects:

	Chronic Fatigue	Gulf War
	Syndrome	Syndrome
appetite		
arms		
head		
mood		
muscles		
neck		
skin		
sleep		
throat		

3. Try to match the words without looking back at the text, than look back and check:
1. a recurrent
2. an overwhelming
b) glands

3. chronic c) swings
4. loss of d) aches and pains

5. mood e) appetite
6. muscle f) sore throat

7. poor g) feeling of tiredness

8. swollen h) illness

12. Old age and the brain

If you hold a pen in your wrong hand, writing becomes uncomfortable and difficult. But keep doing it and you will get better at it – you learn. This is because connections between neurons in your brain get stronger, and your brain grows.

1. According to the text, can you learn to write with your 'wrong hand'?

In our early years our brains grow very fast as we learn a language, writing, numbers, music, and how to coordinate movement. By the time we are teenagers, each neuron in our brain has connected to tens of thousands of other neurons, and every time we have a new thought or memory, our brains make new connections. Just as muscles get stronger by using them, the brain develops when it is stimulated. Without stimulation, it gradually dies.

- 2. What happens to our brain from our early childhood to the teens?
- *3.* Why is brain compared with muscles?

A healthy brain does not lose huge number of brain cells as it ages. It continuous to rewire itself and grow new neurons. However, degenerative brain diseases (DBD) are very common in old age, and so we associate ageing with diseases such as Alzheimer's disease.

Even though these diseases are very common in the elderly, it is a mistake to think that old age automatically equals mental decline. When elderly people who do not have Alzheimer disease suffer age related losses of memory and motor skills, it is often not because of ageing, but because of inactivity and lack of mental stimulation.

4.	Why do we associate DBD with Alzheimer's disease?
5.	What are the causes of losses of memory and motor skills?

1. Deci	de if these sentences are true (T) or false	<i>(F):</i>		
1.	You can learn to write with the wrong hand			
2.	Learning makes new nerve cells grow			
3.	As we get older, large numbers of brain cells die			
4.	If our brain is healthy, it continuous to develop when we are old			
5.	Mental stimulation keeps your memory			
2. Find	words in the text with these meaning:			
1.	To make things happen at the same time	·		
	To change the electrical connections			
	C 1'4' 41 41 111 1 11			
4.	Loss of the ability to use your brain well			
	C 4: 4 44: 11			
	The ability to control your body movem			
3. Mate	ch the adjectives with the cases:			
An eld	erly person who is			
	1. cannot leave her bed	a) frail		
	2. often wets himself	b) immobile		
	3. breaks the bone easily	c) bedridden		
	4. cannot hear very well	d) confused		
	5. cannot move around freely	e) independent		
	6. often cannot remember things	f) forgetful		
	7. wears his pyjamas in the street	<i>,</i>		
	8. cannot see very well	h) shortsighted		
	9. likes to be free	i) deaf		
	9. likes to be free	i) deai		

4. The effects of ageing. Complete the sentences.

wrinkled	impairment	constipation
growth rate	focus	sensitivity
fragile	discoloured	leakage
fragile	grey	

1.	Hair pigmentation turns It becomes thinner and its
	slows down.
2.	The lenses of the eyes become stiffer and thicker. It becomes harder
	to on near objects.
3.	Deterioration of the inner ear causes hearing
	•
4.	Teeth become and fragile, and fall out.
	Skin loses elasticity and becomes dry and It
	also becomes thinner, causing increased to the cold.
6.	Digestion slows down, causing
7.	Fatty deposits the blood flow and cause high
	blood pressure.
8.	The bladder can't hold as much urine, and there is some
	<u> </u>
9.	Bones become .

12.1 Glasses: The Importance of Seeing Clearly

- A. If you had to make a list of ten inventions that have changed the world, glasses would be on it.
- B. Most people's eyes can work efficiently for only about 35 years, and after that they may need reading glasses. 800 years ago there was no such thing as correcting sight and early in life almost everyone became disabled by failing eyesight.
- C. Glasses were invented in the fourteenth century and very quickly spread throughout the world. Their invention was vital to the creative and intellectual progress of the Renaissance a period of rapid development in mathematics, science, commerce, medicine, and art.
- D. Spectacle lenses correct other problems too, such as aberrations (seeing ghost images, haloes, waves or rainbows) and squints (strabismus), when the two eyes do not point in the same direction. However, their most common use is to correct long-sightedness (hyperopia) where you cannot focus

on near objects, short-sightedness (myopia) – where you cannot focus on distant objects, and the loss, through ageing, of the eye's ability to change focus (presbyopia)

E. The invention of glasses freed people from the effects of ageing. At the point in their lives when their knowledge and skills were at the highest level, people could continue to read, do accounts, write and do small-scale, detailed work. Glasses have effectively doubled the length of time one can expect to live a productive life.

F. The link between glasses and poverty can be seen in developing countries today. The World Health Organisation says that 28 million people in developing countries, where a pair of glasses can cost several month's salary, are blind from treatable conditions. Educated people like engineers and teachers have to retire early, and millions never learn to read, simply because they cannot see.

 Match the titles with the paragraphs. The social effects of glasses How glasses are made Sight in the developing world The invention of glasses How glasses work An important invention The limited life of eyes 	
2. Decide weather these statements are true 1. Most people of 45 need reading glasse	()
2. Scientific progress in the Renaissance	
3. Haloes are an example of aberration.	
4. A squint is a focusing problem	
5. People with hyperopia need glasses fo	
6. Glasses doubled the hours that people	
7. Cheaper glasses would help the econor	mies of developing countries

13. Mental health nursing

Mental health nursing is often complex, demanding and very rewarding. As many as one in three people are thought to suffer some form of mental

health problem. However, dealing with the human mind and **behaviour** is not an **exact science**. The **dividing lines** between madness, eccentricity, and normality are in fact rarely clear."Mental illness" is a broad label for illnesses that include: emotional instability, behavioural disorders, and cognitive dysfunction.

There are almost 400 recognized and named mental disorders, including common ones such as depression, schizophrenia, **hyperactivity**, Tourette syndrome and **obsessive compulsive disorder**.

1. Match the words in bold with the explanations below:

- 1. The way in which one acts or conducts oneself, especially toward others
- 2. A physical state in which a person is abnormally active
- 3. Anxiety disorder in which people have unwanted and repeated thoughts, feelings, ideas, sensations or behaviors
- 4. Any field of science capable of accurate quantitative expression
- 5. A conceptual separation or distinction

13.1 Core qualities and skills

Your main tool as a mental health nurse will be the strength of your own personality and communication skills. You will need to **empathize** with the people you are dealing with and show warmth and care about them. Regrettably there is still some stigma attached to mental illness. Combating this and helping the individuals and their families deal with it is a key part of the job.

13.2 Diverse settings

Most mentally ill people are not cared for in hospital but in the community.

You might be based in a community health care centre, day hospital and outpatients department or specialist unit. You will need to have a good understanding of the theories of mental health and illness.

As a nurse working in mental health you would work as part of a team which includes general practitioners, psychologists, social workers, psychiatrists, occupational therapists, arts therapists and healthcare assistants.

13.3 A conversation between a nurse and a patient:

Nurse: How long have you felt this way?

Patient: It started when I was a child. I was a very quiet child.

Nurse: Have you ever seen a psychiatrist?

Patient: No, I have never seen a psychiatrist, but I have talked to my doctor many times.

Nurse: I see. When did you first talk to your doctor?

Patient: The first time was two years ago. I went to see him because I

couldn't talk clearly.

Nurse: Have things got worse since then?

Patient: Well, they got much worse after that. But recently things have been a little better.

Nurse: Really, that's good. Have you ever taken medication?

Patient: Yes, I have taken a lot of different things over the years. I

took a Nardil tablet first thing yesterday morning.

Nurse: Have you taken anything else today?

Patient: Yes, I needed something before coming here, so I had a Prozac tablet.

13.4 Mental illness

1. Match each word with its definition:

1.	posture	a) the false belief that somebody is trying to harm you, or that you are somebody
		very important.
2.	unemotional	b) not sure where you are
3.	hallucinations	c) not wanting to talk to people
4.	manic	d) not logical, not making sense
5.	paranoia	e) behaving in an abnormally excited way
6.	disoriented	f) not sowing your feelings
7.	uncommunicative	g) a way of standing or sitting
8.	delusions	h) feelings of extreme, uncontrollable
		sadness
9.	irrational	i) strange and false ideas that somebody

believes are true

j) occasions when you imagine you see things that are not really there

Paula is a nursing assistant. She is finishing her shift and Jack is starting his. Jack is checking the list of things to do. Listen to the conversation, and write a tick or a cross next to each job on the list to show if Paula has done it yet.

Change patients' dressings
Mrs. Ericson - blood pressure
Mr. Sissoko - temperature
Clean up spillage

Mrs. Wong – urine specimen

14. Shizophrenia - the facts

Every year 1.5 million people worldwide are diagnosed with schizophrenia. It's a mental illness which has periods called "psychotic episodes". During a psychotic episode, a sufferer shows disturbing changes in behavior. They may seem very cold and unemotional, using few facial expressions, and say strange things in a slow flat voice. They may lose all interest in life and spend days doing nothing at all, not even washing or eating. These distressing symptoms are shocking for family members who, of course, remember what the sufferer was like before the onset of the illness.

During a psychotic episode there may be hallucinations. Hearing voices that other people do not hear is the most common type of hallucination. The voices give orders and carry on conversations. Sometimes the voices swear and make threats.

Someone with schizophrenia may have delusions, believing for example that they are famous, historically important person or that people on television send them special messages.

People with schizophrenia may not think logically. They are isolated because conversation with them is very difficult, so they have no one to communicate with.

It is relatively common for schizophrenia sufferers to commit suicide -10 percent of people with schizophrenia (especially young adult males) kill themselves. Violence and threats against others, on the other hand, are not the symptoms of the illness.

There is medication that can reduce symptoms, but it often has bad side effects, and some sufferers discontinue treatment because of this. Although many sufferers can continue to lead a relatively normal life, it has been estimated that no more than one in five individuals recovers completely, and most will require long-term treatment.

We do not yet know the cause of schizophrenia. Researchers have looked at links with genes, with brain development, with infections before birth, and with traumatic life events.

. <i>E</i>	Inswer the following questions.
1.	Explain the basic symptoms of schizophrenia.
2.	Why are the symptoms shocking for family members?
3.	What kind of hallucinations do the schizophrenia sufferers experience?
4.	Explain the delusions the sufferers may have.
5.	Why are the sufferers usually isolated?
6.	Are violence and threats against others symptoms of the sufferers?
7.	Have researchers found the cause of schizophrenia yet?
8.	What have researchers looked at while trying to find the causes of the illness?

2. Join these word combinations.

1. changes a) relatively normal life 2. facial b) completely 3. the onset of c) side effects 4. think d) suicide 5. commit e) expressions 6. reduce the f) treatment 7. have bad g) the illness h) in behavior 8. lead a 9. recover i) logically j) symptoms 10. long-term

1	2	3	4	5	6	7	8	9	10

15. What Is Radiology?

Radiology is a specialty of medicine in which images of the body's organs are interpreted in order to diagnose disease. Radiologists are medical doctors (MDs) having the specialized training to interpret medical images for diagnosis while radiologic technologists are the medical imaging professionals that use and manage the equipment for making the images. Radiologists interpret these images and give reports to referring clinical doctors ranging from surgeons, pediatricians, obstetricians, and internists to work as a team in providing medical care.

Radiology is vital for nearly every sector of health care, including surgery, pediatrics, obstetrics, cancer-care, trauma-response, emergency medicine, infectious disease and much more.

15.1 Medical Images

- 1. Radiographs: X-rays to image bones, chest, and abdomen
- 2. *CT*: Stands for "computed tomography" in which multiple angles of X-rays from a doughnut-shaped machine around the patient form an image based on computer calculations
- 3. *MRI*: Stands for "Magnetic Resonance Imaging" in which magnetic fields and radio waves are used with computer processing to make images
- 4. *Ultrasound*: using sound waves to make moving images on a monitor, with common examples being fetal ultrasound during pregnancy and ultrasound images of the heart, which are called echocardiograms.
- 5. *Mammograms*: using X-rays specially powered, aimed, and positioned for breast tissues
- 6. *Fluoroscopy*: using X rays that produce real-time moving images of the body for doing procedures, such as stents for narrowed vessels and drainage catheters, as well as imaging the gastrointestinal tract
- 7. *Nuclear medicine*: short acting radioactive substances go to certain parts of the body and emit light from bodily processes that are collected by a camera and processed by computer to form an image.
- 8. *Teleradiology*: transmitting radiology imaging to locations outside of the facility where the images are made, to have a radiology interpretation given electronically

15.2 About your X-ray or scan in the radiology department

Going to have a scan or an X-ray can be daunting if you have never experienced one before. But there is nothing to be alarmed about as there are lots of people on hand to support you.

When you receive your appointment you may be given some instructions to follow such as having nothing to eat for 4-6 hours before the X-ray or drinking plenty of water so that you have a full bladder before the scan. It is important that you follow these instructions and if they are not clear or you are unsure about any part of the procedure don't be afraid to ask questions.

15.3 Diagnostic imaging

You may be referred to the diagnostic imaging department for an investigation which will produce images of the relevant part of your body that will help in the identification, evaluation and monitoring of any disease processes or injury. The range of imaging investigations that may be done include:

Plain radiography

A radiograph is an image of the internal structures of the body and is produced by exposure to radiation (X-rays) with the image being recorded in digital form and displayed on a computer screen.

Fluoroscopy

Fluoroscopy is a procedure which uses radiation to produce a real-time image of parts of the body, where anatomy and function/movement can be assessed. In association with this study a contrast agent is used to outline parts of the body to be imaged, which would otherwise not show up well on the images.

Angiography

Angiography is a procedure where X-rays are used to investigate and image blood vessels and blood supply to body organs after injecting an iodine-based contrast agent into the vascular system (usually the femoral artery) via a catheter.

Computed Tomography Scanning

Computed tomography scanning provides cross-sectional images of the body using a beam of X-rays which rotates around the patient, and an array of sensors on the other side of the patient that detects the amount of radiation passing through the patient. This information is used to produce images that are displayed on a computer screen.

Interventional Radiology

This refers to a range of techniques which rely on the use of an imaging procedure to guide treatment to a specific area of the body. Most interventional treatments are minimally invasive starting with passing a needle through the

skin to the area requiring treatment. This can be used to treat a range of conditions such as narrowing of arteries or removal of gall stones.

15.4 Who you might meet?

Radiologist

A doctor who specialises in the use of imaging equipment and techniques to produce images of parts of the body from which they can diagnose injury or disease. In addition they may use imaging equipment to undertake a range of procedures to treat certain conditions such as unblocking narrow blood vessels in the heart.

Diagnostic Radiographer

A healthcare professional qualified to use a range of equipment and techniques to produce images of the body to diagnose injury or disease. They may work alone or as part of a healthcare team with radiologists, nurses and other health professionals. The radiographer mainly works in the diagnostic imaging department but may also carry out imaging procedures in Accident and Emergency, the operating theatre or on the wards.

Oncologist

A doctor who specialises in the treatment of cancer using radiotherapy and/or chemotherapy. They work closely with therapeutic radiographers and medical physicists as well as other health professionals to prescribe the appropriate radiotherapy and/or chemotherapy treatment for each patient depending on their type of cancer.

Therapeutic Radiographer

A healthcare professional qualified in the planning and delivery of a prescribed radiotherapy treatment using a range of equipment and techniques. They work in the radiotherapy department and work as part of a multi-disciplinary team with medical physicists and oncologist. The radiographer will see a patient over an extended period of time as they visit the radiotherapy department for their course of radiotherapy treatment.

Medical Physicist

A healthcare professional who takes the lead in commissioning equipment, as well as its calibration, safe use and maintenance. They may work in diagnostic imaging or radiotherapy departments and have an important role in ensuring the radiation protection of patients and staff. In radiotherapy they will be involved in planning the treatment for patients using a range of equipment and supervising the dose of radiation needed to treat a cancer patient

15.5 Career Opportunities and Job Requirements for Radiology Techs

If you're interested in a career in the world of medicine, but do not want to work as a nurse or doctor, one of your options is to earn a radiology tech degree. These programs are relatively short, especially compared to the years of education you'd need to become a doctor, but you'll still be able to do important work with patients as part of a medical staff that helps diagnose and treat diseases.

Radiology is the field of medicine that uses various types of imaging in order to see inside the patient's body to diagnose and treat disease.

Job options

With a radiology tech degree, you have a few options you can consider in terms of a career path. First, you can become a radiology technician, working with x-ray machines to help understand a patient's medical condition. You can also work as a radiology technologist, working with other types of imagining machines that could help doctors assess a patient. As a radiology tech, you could specialize, which allows you to work with a certain type of advanced machine. For example, MRI technicians work with magnetic resonance imaging while CT technologists work with computerized tomography. This depends on which specialty interests you; in many circumstances, radiology techs who choose to specialize make themselves more appealing to future employers, as well as improve their earnings salary potential.

Daily tasks as a radiology tech

No matter what you position in the field of radiology tech, your primary responsibility will be to maintain and use equipment, which will help patients

receive the care they need. Some radiology techs work one-on-one with patients, preparing them to use the machines, positioning their bodies for the best images, and explaining to them the process if necessary. Others work with the machine controls, and still others work with doctors, helping to analyze the results. At larger facilities, you may do just one of these tasks, while at smaller facilities, you may be the only team member in radiology.

Radiology tech requirements

Are you interested in working as a radiology tech? If so, getting your degree can take anywhere from one to four years, depending on the program you choose. Most radiology techs join one of the nearly 400 radiology tech associate's degree programs, though some employers look more favorably on job candidates with a bachelor's degree in this field. Your classes in this kind of program will cover skills that you need to run the machines, analyze the images, maintain and clean the patients, communicate with patients, and more.

PART 3

Extra Vocabulary Exercises

1. Things on the ward

1.	This covers the bed to keep off the dust
2.	To rest their head on
3.	A patient confined to bed will have to use this to urinate and defe- cate
4.	Patients use this when they need to call a nurse
5.	For identification, this is worn by patients around their wrist
6.	A narrow bed for transporting patients
	Wash your hands here
8.	A mechanical device for lifting and moving patients
9.	Drawn around a patient's bed to provide some privacy
10.	Two of these on the bed are straightened regularly and washed every few days
11.	Meals are brought to the bed on this
12.	These keep the patient warm

13. Male patients confined to bed use this to urinate
14. Suspended above the bed, this can be used by patients to pull them selves up
15. Patients lie on this, it's sometimes hard and sometimes soft
16. Intravenous fluid bags are suspended on this
17. Patients who can sit up comfortably can be transported in one of these
18. A patient with a broken leg will need two of these to get around
19. A mask and tube from this will supply oxygen to the patient
20. The patient's condition is recorded here

monkey pole	call button	urine bottle	tray
name band	pillow	oxygen point	bedpan
basin	wheelchair	observation	drip stand
blanket	hoist	chart	curtain
trolley	crutch	bedspread	sheet
		mattress	

2. Basic hospital vocabulary

1.	People in hospital with some form of illness are known as (ptientas).
2.	When they first arrive at hospital, a doctor or nurse
	them and shows them to a bed in a (tda-
	mis)(draw)
3.	There may be a letter of from another doctor ex-
	plaining the history. (learrfer)
4.	The doctor may have to complete a for tests. (se-
	quert)
5.	Many medical personnel have to be ready to go to work in the event
	of an emergency if they are (cloanl)
6.	of an emergency if they are (cloanl) The doctor may decide to have blood, urine or tissue
	analyzed. (sencemips)
7.	Every day the doctor will speak to the patients during the
	(draw) (undor)
8.	Patients who require surgery will be asked to sign a
	form. (steconn)
9.	A patient who is well enough to go home will be
	(chagisdred)
10.	A patient who does not need to stay in hospital overnight can see
	the hospital specialist as an and will be given an ap-
	pointment to attend the (pattitoune)(liccin)
11.	When colleagues are absent from work because of illness, others
	will have to (crove)
12.	Patients who are getting better are (stealnecconv)
13.	The hospital may arrange for a when doctors are on
	holiday. (cloum)

3. Giving instructions

bend	clench	take
read	show	grip
say	lift	cough
open		

Can you _____ your fist?
 ____ me your hands, please.
 Could you ____ your mouth?
 Just ____ your arm, please.
 ____ a deep breath.
 ____ Aaaaaah!
 ____ the bar tightly!
 Can you read the letters?
 ____ , please.
 Can you ____ your leg?

relax	stand	lie
stretch	roll	turn
touch	hold	open
rest		·

_____ as far as you can!
 Can you ____ touch your toes?
 Can you try to ____ on one leg?
 Can you ____ over, please?
 You can ___ your mouth now!
 Could you ____ down, please?
 And ___ your breath!
 Just ____ up your sleeve, please!
 Can you ___ your arm here?
 Don't worry! ___ !

4. Types of illness

1.ischaemia	8. metabolic	15. carrier	21. side effects
2.trauma	9. infectious	16. contagious	22. foetus
3.immunologic	10. infestation	17. neoplasms	23. idiosyncratic
4.benign	11. defect	18. epidemic	24. congenital
5.necrosis	12. allergic	19. deficiency	25. degenerative
6. corrosive	13. hereditary	20. allergen	26. protozoa
7. malignant	14. obstruction		

A (1) dating from birth disease may be (2) passed down from parents to offspring or may be the result of damage to the (3) unborn baby. (4) Physical damage may be the result of surgical operations, accidents, excessive temperatures, radiation or (5) destructive chemicals. Mechanical (6) faults lead to the (7) blocking of tubes or vessels.

An infection or (8) **invasion** of living organisms may be the cause of disease. These living organisms include viruses, bacteria, (9) **worm-like parasites**, fungi or animal parasites. Some of these diseases are (10) **spread easily between people** and the result may be (11) a **large number of people suffering the disease**. It's possible to have a (12) **person with the disease** but no symptoms. Some diseases may be (13) **passed on by touching**. Most tumors are (14) **new growths**. Some of these are (15) **mild and self-limiting**, while others are (16) **cancerous and spread**.

A (17) **wearing out** disease happens when tissue loses its normal function. There may be (18) **insufficient blood supply to an organ** which may result in infarction and subsequent (19) **death of the tissue**.

If biochemical reactions in the body are upset, the result may be a (20) **chemical conversion** disease. One possible cause is an excess or (21) **shortage** of certain nutritients in the diet.

Problems in the body's complex defence mechanism can lead to (22) **defence mechanism** disease. One possible cause is a (23) **hypersensitive** reaction to an (24) **external substance** which to most people is harmless.

Some drugs or poisons may cause disease because of the (25) **unwanted** action of these drugs. This can be dose-related or (26) have a bad effect only on a few people.

5. Food

(1) diet contains all the necessary substances required by						
ody cells. There can be adverse effects from overeating as well as from (2						
. A varied diet is the best way to ensure an adequate (3)						
of all the	essential nutritients. The e	essential nutritients are wa				
	n, lipid, vitamins, and (4)					
Carbohydrates are the m	ain source of (5)	They comprise				
sugars, (6)	_ and complex polysacch	narides. Fruit and vegeta-				
		n be indigestible because				
they contain more (7)						
on or av	gtarahag	aallulaga				
intake	starches minerals	cellulose balanced				
undernutrition	mmerais	balancea				
The component (8)	of protein are	essential for structural				
		supply. High quality pro				
	sted and (9)					
	(beans, pea					
	(oeans, pea	s, rentilis etc.).				
Lipids provide concentra	ated energy and are used l	by the body to store ener-				
gy. They provide (11) _	under the sl	xin, (12)				
major organs from traun	na and are required for eff	fective neural function.				
They give food aroma ar	nd (13), in	crease palatability and				
give a feeling of satiety.						

pulses	amino acids	protect				
insulation	absorbed	flavour				
Only small (14)	of vitamins are re	quired. Fat-soluble vita-				
mins are absorbed from	the small intestine and are	e found in (15)				
and plan	t oils. They can be (16)	stored in the				
	Water-soluble vitamins a					
-	body. Vitamin B complex	• ` '				
	tinic acid. Foods providing					
	•	ig these include (19)				
(wneat, 1	rye) yeast, milk and eggs.					
There are many mineral	s that are essential for hea	lth, but iron, (20)				
, and zinc are the most significant. Zinc is involved in en-						
	-					
zyme reactions and is important during periods of growth and wound (21) . It is found in animal products. Iron is a major component						
of (22) and is important in enzyme processes and in the						
immune response. Iron is found in most foods but must be in (23)						
form.						
amount	fish	lost				
cereals	stored	healing				
iodine	riboflavin	C				
bioavailable	Hoonaviii	haemoglobin				
uloavallaule						

6. Different types of drugs

1. A wide range of drugs to relieve pain.	
2. They help to remove excess fluid from the body.	
3. They increase activity.	
4. These drugs are used to reduce and suppress swelling.	
5. Excellent pain killers originally derived from opium.	
6. These help suppress nausea and vomiting.	
7. One of the best known drugs which anyone can buy and us lieve pain, inflammation and fever.	e to re-
8. They prevent blood clots forming.	
9. They soothe patients and help them sleep.	
10. These are used to calm people and relieve anxiety.	
11. Taken to relieve constipation.	
12. These help to clear a stuffy nose.	
13. Antibiotics are sometimes given this name because of the relief they bring to many infectious diseases.	ne rapid
14. It is used in treatments of diabetes.	
15. It is used to increase the performance of a weak heart.	

PART 4

Writing exercises

1. Profile of a health care student

- I'm interested in...
- I'd like to work...
- In my free time, I...
- I really enjoy...
- I'm studying...
- I'm very...
- Next year...
- I've worked...
- One day, I hope to...
- At the moment...
- I really don't like...
- I'm good at...
- I want to be a...because...

Work with your seatmate and ask questions for which the above sentences could be the answers. Look at the example dialoque:

- A: One day I hope to work in another country.
- B: Really! Where?
- A: Maybe Australia.
- B: Why do you want to work in Australia?
- A: It's an interesting place and nurse's pay is not bad!
- B: How much...

Read this profile of a student nurse, and write a similar text about your partner:

Susan May is nineteen years old. She's studying for a diploma in nursing at Barcley Nursing College. She has exams next month, so at the moment she's studying hard. She wants to be a nurse because she likes working with people and she's interested in science, but she really doesn't like doing paperwork.

She'd like to be a pediatric nurse because she really enjoys working with children. She's worked on a children's ward for three months as a work placement. One day, she hopes to work in a children's hospital in India, which she saw on television.

She's good at talking to people and making them feel comfortable, and she very organized. In her free time she plays the guitar, and goes out dance most weekends.					

2. A patient record

PATIENT RECORD

Write a summery about Sarah Behr using the information on the patient record below:

Surname	Denr
First name	Sahra
DOB	2/1/84
Gender	F
Occupation	teacher
Marital status	married
Next of kin	father Ian
Contact no.	01792-793456
Smoking intake	n/a
Alcohol intake	10 units per week
Reason for admission	suspected fractured arm
Family history	heart disease (father's side)
	nuts
Allergies	

3. Email job application

Read this advertisement for a job, then put the expressions in the correct places in Juliet's email:

Job title: Mental health nurse CITY HOSPITAL PSYCHIATRIC UNIT

CITY HOSPITAL

Psychiatric Unit

Good salary and conditions. Would suit newly qualified nurse. Apply to Chief nursing Officer John Till: j.till@cityhospital.nhs.uk

From: Juliet Francisco To: j.till@cityhospital.nhs.uk Subject: post of mental health nurse Dear Mr. Till I am writing the job advertised on the city hospital website. I am 22 years old, and I have qualified as mental health nurse. Ι also have I have done placements on a geriatric ward and in a prison unit. Last summer I worked as a volunteer on a camp for children with learning difficulties. that I have the necesfor working on your unit. sary would welcome opportunity . My phone number is 01632 960081. a copy of my CV. Yours sincerely skills and qualifications to meet with you I believe relevant work experience I am attaching to apply for

Complete the job application with the given words:

Michael Lemodo

Box 46, Accra Ghana M: 0547890783 milemodo@yahoo.co.uk

[date]
Dr. Felix Lincl
HR Manager
Anold Pharmaceutical

Dear Dr. Lincl		
Re: Dispensing P	harmacist	
I am writing to a	oply for 1) of	Dispensing Pharmacist at
Anold Pharmaceutical as	s recently 2)	in the Daily Graphic
As a recent 3)	of Pharmacy	graduate from University
of Ghana, I am looking	forward to applying my sl	graduate from University kills in a practical setting. I
am a 4) , e	enthusiastic person and w	ould be thrilled to work for
your 5) P	harmaceutical Company.	
		lertaken a national service
		to further 6)
		dispensing experience. To-
binko Pharmaceutical is	a high traffic environme	ent, requiring me to utilize
my outstanding ability t	o prioritize and 7)	multiple tasks, in-
cluding customer service	e, technical and administra	ative tasks.
My background in	n drug medicinal 8)	to patients has
provided a sound frame	ework for my transition	to a customer-facing role.
		s, I have gained excellent
		e the ability to solve prob-
lems and handle challen		, I
		s this application with you
	to hearing fr	
	&	- 9
Yours sincerely,		
Michael Lemodo (sign here)	
	(* 6	
juggle,	look forward	Reputable
hardworking.	look forward advertised Bachelor	Enhance
the position	Bachelor	application

4. Writing a CV

4.1 How to write a Pharmacy Placement CV

Name: DAVID JONES

Home Address: 35 Westland Grove, Caterham, Surrey CR2 3RS **Term Address:** Liberty Quays, Victory Pier, Gillingham, Kent

Contact: 07789423333 Email: D.Jones@gmail.com

Objective: To gain a summer pharmacy placement

Key Skills & Qualities

• Highly self-motivated, confident and professional individual

- Good team player who possesses excellent problem solving skills and an attention to detail
- Excellent listening, communication and interpersonal skills, both written and verbal
- Willingness and curiosity to learn about new medicines and treatments
- Desire and enthusiasm to assist the public with their healthcare needs
- Ability to act on own initiative and make quick, effective decisions when necessary
- Highly innovative, flexible and resourceful individual with a solid background in science
- Excellent laboratory skills, techniques and knowledge
- Excellent research methods gained through project based learning

Educational Qualifications & Achievements

2005-2010 Medway School of Pharmacy

MPharm Year 3
Pharmacy Practice
Best student award

1998-2005 St John Fisher School, Chatham A-Level: Maths (C), Chemistry (A), Biology (C)

AS Level: French (C), Statistics (D)

GCSEs: 9 GCSEs (A-C grades) including English & maths

Placement History

Oaks Pharmacy, Aylesford 2005-2006 Delmergate Pharmacy, Chatham

I completed 60 days' student placement (at separate intervals of 30 days each) in these two pharmacies. I worked in all sections of the shop, shadowed the pharmacist and completed an assessed workbook as evidence of my learning. My responsibilities included pricing new stock, serving patients/customers and giving relevant health advice, placing orders over the phone/internet, sorting and putting away new stock deliveries, collecting prescriptions from nearby surgeries, printing medicine labels and dispensing as required. I was able to develop good listening skills, a polite and professional telephone manner, excellent customer service and organisational skills

Employment History

2008 - to date Student Ambassador Medway Campus

My responsibilities include going to schools, organizing group presentations, raising aspiration campaigns and awareness of HE opportunities. Gaining confidence of teenagers, encouraging and supporting them in their study and HE application. This has led me to develop excellent computer skills in Word, Powerpoint and DTP, presentation skills and a concise, positive style of communication.

Summer 2006 Trainee Healthcare Assistant Boots, Chatham

My responsibilities included compiling prescribed medicines for supply to care homes and dealing with any queries that arose. This involved ordering and dispensing medicines and working with the team to ensure that deliveries were sent off on time and any delay minimized.

I also worked on the healthcare counter making sales of medicines and giving healthcare advice when necessary. This led me to develop useful problem solving skills and an ability to act on my own initiative as well as the unique skill of paying great attention to detail although working in the pressurized environment of a busy pharmacy. Good time management and pri-

oritizing ensured all were treated according to need and fairness. Here, I was able to put into practice what I had learnt at University, learn even more in a busy but friendly pharmacy environment and also develop my knowledge on the treatment of various minor ailments.

2004-2005 Healthcare Sales Assistant

References available on request

Boots, Chatham

My responsibilities included making over the counter sales, taking inventory, filling shelves, date checking and occasional working elsewhere in the store. During this time, I started the Healthcare Assistants Course and spent time on prescription reception. I also attended a Smoking Cessation Day organized by the PCT for pharmacists and assistants. It was very informative and helped me to develop greater insight and understanding in the use of Nicotine Replacement Therapy and lifestyle/behavioural changes that may be recommended to the patient/customer to help them quit successfully.

Interests

I enjoy researching, reading, travelling and surfing the internet. I also keep fit by attending weekly aerobics and salsa classes.

List the headlines of the CV:
List the headlines of the Cv:
List the skils the applicant developed during his student placement :

4.3 Writing a Midwife Placement CV

Samantha Green

Personal summary

A highly focused and knowledgeable Midwife with experience of providing a high standard of Midwifery care within a hospital setting. Having a positive attitude and able to give encouragement and reassurance care to low and high risk women and their families throughout the pregnancy period. Supporting women physically and mentally through the efficient and effective use of material resources, supplies and drugs. Presently looking for a suitable position with a progressive hospital, local clinic or GP surgery.

Working experience

Mile Hill Hospital – Coventry

MIDWIFE June 2008 – Present

Working in a busy maternity unit supporting and assisting women through childbirth. Providing specialist expertise to mothers in the antenatal and postnatal period, delivering quality based care within a hospital and community setting.

Duties:

- 1) Responsible for assessing, planning and implementing Midwifery care.
- 2) Involved in the development of the maternity service.
- 3) Communicating effectively and sympathetically with mothers and relatives.
- 4) Ensuring high standards of clinical care are maintained.
- 5) Involved in neonatal resuscitation suturing and taking blood.
- 6) Involved in developing guidelines and policies for maternity care.
- 7) Working in the special care baby unit facility.
- 8) Supporting the professional development of students and junior midwifery staff.
- 9) Making sure all medical equipment is safe to use and properly maintained.
- 10) Liaising with other professionals in the multidisciplinary team.
- 11) Keeping paper and computerised medical records accurate and up to date

- 12) Acting as the mothers advocate and promoting their own health and well being.
- 13) Referring clients to other practitioners e.g. senior midwife, obstetrician and paediatrician.

Key skills and competences

- Remaining calm and dealing with potentially life threatening emergency situations.
- Comprehensive knowledge and understanding of NICE guidelines.
- Knowledge of neonatal resuscitation.
- Excellent counseling, listening and general communication skills.
- Flexible approach to shift patterns, able to work evenings and weekends.
- Maintaining high standards of personal appearance.
- Having the ability to organize & prioritize workload within a hospital / medical setting.

Academic qualifications

BSc (Hons) Midwifery

Nuneaton University 2005 - 2008

A levels: Maths (A) English (B) Technology (B) Science (C)

Coventry Central College 2003 – 2005

Personal Interests:

I enjoy long distance running, cycling and swimming. I am also a longstanding member of my university rock climbing team, and relish the often challenging teambuilding and teaching aspects of climbing. I also enjoy the close social network of fellow climbers I've had since joining the team in 2007.

References

Available on request

Match the collocations from the text:

(1) support
(2) make sure
(3) provide
(4) maintain
(5) keep
a) high standard care
b) positive attitude
c) records accurate and up to date
d) health and well being
e) with other professionals

(6) promote f) encouragement

(7) have g) all medical equipment is safe

(8) give h) high standard

(9) liaise i) women physically and mentally

1	2	3	4	5	6	7	8	9

4.4 Writing a Physiotherapist Placement CV

Gary White

Physiotherapist

Areas of expertise

Musculoskeletal physiotherapy Orthopaedics Stroke management Sports injuries Patient care Neurological conditions Multiple Sclerosis

Personal summary

A highly motivated, confident individual with exceptional multi-tasking and organizational skills. Able to communicate effectively and sensitively with patients

and cares to maximize the rehabilitation of patients and to ensure understanding of

often complex clinical issues impacting on recovery. Excellent client facing skills

and the ability to work closely with other health care professionals to assess a patient's needs and devise suitable treatment plans for them.

Ready and qualified for the next stage in a successful career and looking forward to

making a significant contribution as a physiotherapist.

Work experience

Local Hospital—Coventry PHYSIOTHERAPIST June 2008-Present Provide physiotherapy and treatment for both outpatients and inpatients. Responsible for managing a clinical caseload, providing physiotherapy assessment and treatment to the highest standard.

Duties:

- Providing a high standard of physiotherapy service to patients.
- Organising & prioritising own workload & delegating responsibilities accordingly.
- Ensuring that equipment used in carrying out physiotherapy duties is safe.
- Involved in ward rounds, meetings and case conferences.
- Supervising and teaching recently qualified physiotherapist assistants.
- Evaluating, planning and delivering care plans in response to complex needs.
- Based in various clinical settings i.e. neuro-rehab, community, wheelchairs.
- Reporting all complaints/incidents to senior managers & documenting them.
- Implementing relevant standards and policies.
- Involved in a patients pre-admission and follow-up care.
- Prioritizing urgent referrals and emergency cases.
- Working with respiratory, orthopaedic, acute neurological and multi-pathology patients.

Key skills and competencies

Able to manage escalations, issues and risks.

Experience of dealing with emotional and stressful situations.

Can motivate others through effective communication skills.

Able to deal with hostility in the form of verbal and physical aggression.

Ability to work independently in busy environment.

Highly developed dexterity, co-ordination and palpation skills for assessment.

Fully aware of fire, health & safety and other departmental policies.

Flexibility to work weekends on rotational basis.

Academic qualifications BSc (Hons) Physiotherapy Nuneaton University 2005 -2008 A levels:Maths (A) English (B) Technology (B) Science (C) Coventry Central College 2003 -2005				
References Available on request.				
Available oil request.				
List the topics from the CV				
Mach the halves of the phrases fr	rom the 'duties' part of the CV:			
d) involve in e) supervise f) evaluate g) report h)implement i) prioritize j) work with	 responsibilities ward rounds complaints and incidents high standars relevant polices recently qualified assistants workload urgent referrals the equipment is safe acute neurological patients care plans 			

a	b	c	d	e	f	g	h	i	j	k

Interview questions

- 1. Tell me about yourself and the town you come from.
- 2. Why did you choose our school?
- 3. What would you like to major in? Why?
- 4. Does your college record accurately reflect your effort and ability?
- 5. Recommend a good book to me.
- 6. What did you do last summer?
- 7. What do you do best?
- 8. What do you hope to do after finishing college and what do you see yourself doing 10 years from now?
- 9. How do you define success?
- 10. What is your best weakness?
- 11. What makes you special?
- 12. Do you do something outside the classroom, extracurricular activities, and for fun?
- 13. What three adjectives best describe you?
- 14. Who is your hero (people from public life)?
- 15. If you had a thousand euros to give away, what would you do with it?
- 16. What subject/course do you find most challenging?
- 17. How does personal development planning link to your career?
- 18. What are your concerns about the first week working as a new graduate?
- 19. How do you think you will maintain your knowledge and skills once in post?

- 20. How do you ensure quality in your treatment of patients/clients? 21. How do you deal with stressful situations?
- 22. What qualities do you possess that would convince us to hire you instead of the other candidates?
- 23. What are your strengths / weaknesses?
- 24. Are you a team worker?
- 25. Would you like to take part in a students' exchange program?

PART 4

Grammar

1. Pronouns

Subject form	Object form	Possessive adjectives	Possessive pronouns	Reflexive and epha- sising pro- nouns
I	me	my arm	mine	myself
You	you	your leg	yours	yourself
Не	him	his head	his	himself
She	her	her nose	hers	herself
It	it	its wings	its	itself
We	us	our room	ours	ourselves
You	you	your ward	yours	yourselves
They	them	their doctor	theirs	themselves

1. Subject forms.

1.	My name is Sue. (Sue)	am En	iglish, and this is my
	family.		
2.	My mum's name is Angie. (An	igie)	is from Germany.
3.	Bob is my Dad. (My dad)	is a w	aiter.
4.	On the left you can see Simon.	(Simon)	is my brother.
5.	(Sue and Simon)	are twins.	
6.	Our dog is a girl, Judy. (Judy)		is two years old.
7.	(Sue, Simon, Angie and John)		live in Canterbury.

8.	(Canterbury) is not far from London.
9.	My grandparents live in London. (My grandparents)
	often come and see us.
10	. What can (?) tell me about your family?
2. Obje	ect forms.
1.	My sister Jane loves books. This novel is for (she)
2.	My children like Disney films. The video is for (they)
	My brother Matt collects picture postcards. These postcards are for (he)
4.	My parents like Latin music. The CD is for (they)
5.	I like watches. This nice watch is for (I)
6.	My wife and I love sweets. These sweets are for (we)
7.	My nephew likes cars. The toy truck is for (he)
8.	My neighbour wants to go to California next year. The guide book is
	for (she)
9.	Here is another souvenir. I don't know what to do with (it)
	You know what? - It's for (you) ose the best word:
1.	Kate never speaks to Clare because Clare hates (his, they, she,her)
	Mr. Pearson went home becausewas tired. (him, he, them, she)
3.	Tell Pete I miss (her, him, me, they)
4.	Susan meditates daily but is still very stressed.(you, me, he,
	she)
5.	Paul said the children were driving mad. (him, she, they,me)
6.	I saw you and there. (she, he, her, me)
7.	She is faster than am. (her, I, she, us)
8.	We are going to the picnic with Tom and Bob. My dad wants
	and to guide the group. (our, them / us, they/ us, them/ we, they)

1	Fill	in	tho	sente	ncos.
+ .	I'LLL	LIL	une	Seme	m.e.s

1.	I have left the boxes on the floor. Please putaway in the cupboard.
2.	Your friends phoned to say that will meet you at the pub.
3.	Jane and I are going shopping. Would you like to come with
4.	Where's Sam? David is with Would you like to play with? We need another player.
5.	Would you like to play with ? We need another player.
6.	Can you ask John if he wants to come with I don't want to go alone.
7.	Does Peter like Italian food? Yes, loves
8.	Do you listen to American pop songs? No, don't like
9.	Are those flowers for you? No, aren't for
10.	Does Ann love Peter? Yes,loves
1. 2. 3. 4. 5. 6. 7.	Where are (you) friends now? Here is a postcard from (I) friend Peggy. She lives in Australia now with (she) family. (She) husband works in Newcastle. (He) company builds ships. (They) children go to school in Newcastle. We want to see Peggy and (she) family next winter. (We) new house is in the end of the street. Because it is (they) official plan.
6. Poss	essive pronouns:
2. 3. 4. 5.	This book is (you) The ball is (I) The blue car is (we) The ring is (she) We met Paul and Jane last night. This house is (they) The luggage is (he)

7.	The pictures are (she)
	In our garden is a bird. The nest is (it)
9.	This cat is (we)
	O. This was not my fault. It was (you)
7. Cho	oose the correct word:
1.	Jane has lostbook. (mine, her, hers, theirs)
2.	Ben has eaten his lunch, but I am saving(my, mine, her, his)
3.	This bird has broken wings. (it's, its', hers, its)
4.	Wasgrammar book expensive? (your, yours, your's, you)
5.	computer is MAC, butis PC. (your, mine/
	yours, mine/ your, my/ yours, my)
6.	6. We gave themtel. no., and they gave us
	(ours, their/our, their/ours, theirs/our, theirs)
7.	You can't have any chocolates, it's all (your, its, her, ours)
1. 2. 3. 4. 5.	John hurt while he was fixing his car. Peter and I went to the cafeteria to buy some lunch. When I saw in the mirror, I was pleasantly surprised. Ja Yong can do it because her English is excellent. Everyone, help to sandwiches, please. Look, there is a little bird washing in the river.
9. Cho	oose the correct word:
1.	Once upon a time there was a girl called Little Red Riding Hood.
2.	Together with mum, lived in a big forest. One fine day, Little Red Riding Hood's mother said, " grandma is ill. Please go and take this cake and a bottle of wine to Grandma's house isn't too far from house, but
3.	always keep to the path and don't stop!"

4.	In the forest met the big bad wolf.
5.	Little Red Riding Hood greeted and the wolf asked:
6.	"Where are going, Little Red Riding Hood?"
7.	"To grandma's house." answered Little Red Riding
	Hood.
8.	"Can you tell where grandma lives?"
9.	" lives in a little cottage at the edge of the forest."
	"Why don't pick some nice flowers for?"
	asked the wolf.
10.	"That's a good idea." said Little Red Riding Hood and began look-
	ing for flowers. Meanwhile, the wolf was on way to
	grandma's house.
	The house was quite small but nice and roof was made
	out of straw.
11.	The wolf went inside and swallowed poor old Grandma. After that
	put Grandma's clothes on and lay down in
	bed.

2. Nouns

Nouns are words naming things, living beings and phenomena:

2.1 Singular + s

a car	two cars
a lamp	two lamps
a cup	two cups

2.2 After -ch, -sh, -ss, -x we add -es

a sandwich	two sandwiches
a brush	two brushes
a box	two boxes
a dress	two dresses

2.3 After -y we change -y into -i and add -es (-IES)

a lady	two ladies
a city	two cities

2.4 If -y is preceded with a vowel, we add only -s

a boy	two boys
a day	two days
a penny	pennies, pence*

2.5 If a noun ends in -f or -fe

-S	a roof	two roofs	-ves	a thief	two thives
	a cliff	two cliffs		a wife	two wives
	a sheriff	two sheriffs		a life	two lives
				a shelf	two shelves
				a wolf	two wol ves

2.6 If a noun end in -o

-s a disco two discos -es a tomato two tomatoes a piano two pianos a potato two potatoes

a photo two photos a hero two heroes -s, -es a buffalo, a mosquito, a tornado

2.7 New words and technology words get only -s

Radios, CDs, computers, chips....

*penny (sg) ima dva oblika množine:

- a) pennies broj kovanog novca
- b) pence vrednost novca

2.8 Irregular plural

a man	two men
a foot	two feet
a woman	two women
an ox	two oxen
a child	two children
a mouse	two mice
a tooth	two teeth
a goose	two geese

2.9 Nouns having plural form

2.9.1 Pair nouns

Jeans My jeans are on the chair.
Scissors Scissors have sharp ends.
Glasses Her glasses are broken.

e.g. I bought two pairs of jeans.

A pair of pyjamas, shorts, trousers...

2.9.2 Nouns not used in singular

Clothes, stairs, wages...

People-ljudi, narod

- a) person-people (ljudi)
- b) people-peoples (narod)

- e.g. They are a friendly people.
- e.g The native people of Africa often have black skin.

2.9.3 Nationalities:

Nationalities in pural:

the Duch the British the English the French

e.g. the British are thought to be arrogant.

2.10 Nouns only in singular:

2.10.1 Collections of things:

furniture Her furniture is new.
This fruit is delicious.
hair Her hair looks nice.

(but: hairs – dlaka)

e.g. Luggage, jewellry...

2.10.2 Nouns in singular but ending in -s:

news Here **is** the news.

physics Physics is our first lesson.

The United States is a country with 50 federal states.

e.g. athletics, economics, maths, politics....

2.10.3 Apstraktne imenice

homework My homework was not easy. **information** This information wil shock you.

k**nowledge** His knowledge of English is excellent.

2.11 Foreign nouns

analysis analyses
criterion criteria
datum data
diagnosis diagnoses
medium media
phenomenon phenomena
thesis theses

2.12 Nouns denoting groups:

When these nouns express members or elements, a plural form of the verb is used. When the nouns express an entity, then a singular verb is used.

e.g. Class, family, army, band, choir, crew, company, firm, gang, government, orchestra, party...

e.g. The family is on holiday.

The family are packing their suitcases.

2.13 Countable and Uncountable Nouns:

Countable nouns: a pencil, four books, two nurses, a hospital...

Uncountable nouns: water, salt, cream...

Uncountable nouns are often used in a quantifying phrase: a glass of water, a packet of salt, a jar of cream...

Fill in the blanks

advice, chocolate	e, jam, lemonade, meat, milk	, oil, rice, tea, tennis,
sugar		
a cube of	a piece of	a packet of
a bar of	a glass of	a cup of
a bottle of	a slice of	a barrel of
a game of	a jar of	

1. Circle the correct answer:

- 1. The cat is sitting on my <u>bed/beds</u>.
- 2. There are five <u>pencil/pencils</u> on my desk.
- 3. I have two sister/sisters.
- 4. They are riding there <u>bike/bikes</u>.
- 5. We have a dog/dogs.
- 6. How many book/books do you have in your bag?
- 7. My mother has a new <u>computer/computers</u>.

2. Put the words in plural:

3.

1.	These (person)	_ are protesting against the president.
		over there want to meet the manager.
3.	My (child)	hate eating pasta.
4.	I am ill. My (foot)	hurt.
5.	Muslims kill (sheep)	in a religious celebration.
6.	I clean my (tooth)	in a religious celebration. three times a day.
7.	The (student)	are doing the exercise right now.
8.	The (fish)	I bought is in the fridge.
9.	They are sending some (m	an) to fix the roof.
10.	Most (housewife)	work more than ten hours a day at
	home.	
	- Where did you put the (k	
	- On the (shelf) like	
12.	(Goose) like	e water.
13.	(Piano) a	re expensive
14.	Some (policeman)	come to arrest him.
15.	- Where is my (luggage) _	?
	- In the car!	
Writ	te the plural forms correctly	<i>):</i>
	1. city -	8. sandwich -
	2. house -	9. nurse -
	3. boy -	10. elf -
	4. family -	11. phenomenon -
	5. life -	12. criterion -
	6. photo -	13. village -
	7. phone -	14. toy –

4. Write the words from the brackets in plural:

1.	1.My (book)	are on those	e
	(shelf) in the	ne corner.	
2.	There are not many (factor)	y)	in this town
3.	A man has thirty-two (toot)	1)	•
4.	(Scarf) are f	ashionable agair	1.
5.	He brought a lot of (photo)	f	from his trip.
6.	There are many (knife)	on th	ne table.
7.	Look, there are two (deer)_		in the distance.
8.	There were only ten (child)		_ in the room.
9.	Are these (potato)	cooked.	
10.	A dog has four (foot)	<u> </u>	

3. Comparison of adjectives

Adjectives describe nouns. With adjectives, we compare things, living beings and phenomena.

There are three levels of comperison:

Positive: Peter is as tall as Mary.

Comparative: Peter is taller than Mary.

Superlative: Peter is the tallest of all the boys in the classroom

3.1 Short adjectives:

Positive	Comparative	Superlative
Cheap	Cheaper	The cheapest
Large	Larger	The largest
Easy	Easier	The easiest
Lucky	Luckier	The luckiest
Big	Bigger	The biggest
Hot	Hotter	The hottest

3.2 Long adjectives:

Positive	Comparative	Superlative
Expensive	More expensive	The most expensive
Comfortable	More comfortable	The most comfortable

3.3 Irregular comperison

good	better	the best
little	less	the least
bad	worse	the worst
much	more	the most
many	more	the most
far	further	the furthest
	farther	the farthest

2 4				•
3.4.	Iwo	wav	comi	parison:

Quiet clever narrow shadow simple simple / simpler / the simplest, or simple / more simple / the most simple

1. Write the adjectives in the correct form:

1.	She is (thin)	than I thought, but (pretty) of them
	all.	
2.	Do you want (big)_	or (small) size?
3.	He knows French	(much) than his brother, but (lit-
	tle) than Peter	er.
4.	John is (old)	but Mary is (young) in the family.
5.	The end of the bool	x is (interesting) than the be-
	ginning.	
6.	I have (few)	English books than you.
7.	He is (handsome)	man I've ever seen.
8.	He found it (difficul	than he had expected.
9.	This is (late)	news we have heard of him.
10.	A (bad)	mistake could not be made.

4. Present Simple and Continuous Tense

4.1. Present Simple Tense

The Present Simple Tense is used:

For actions hapenning almost every day, or the actions which repete:

e.g. Nurses look after patients.

To emphasise how often the action happens:

e.g. John usually plays tennis once or twise a week.

For well known facts, and characteristics:

e.g. He speaks English very well. Winter begins in December.

The following state verbs are always used in the present simple tense (want, hate, love, believe, know, remember, like, prefer etc.:

e.g. Do you understand what I mean?

Always, usually, often, never, sometimes, every day... are the adverbs used in the present simple tense

Affirmative form:

Subject	Lexical verb	Suffix
I	read	/
You	read	/
He/she/it	read	-s
We/you/they	read	/

Interrogative form:

Auxiliary verb	Subject	Lexical verb
Do	I	Read
Do	You	Read
Does	he/she/it	read
Do	we/you/they	read

Negative form:

Subject	Auxiliary verb + not	Lexical verb
I	do not (don't)	read
You	do not (don't)	read
He/she/it	does not (doesn't)	read
We/you/they	do not (don't)	read

Example sentences:

She writes letters.
She doesn't write letters.
Does she write letters?
What does she write?

Spelling changes:

a) No spelling changes, only the suffix -s is added:

live = liveS eat = eatS work = workS talk = talkS

b) Verbs ending in -CH/-SH/-O/-X/-SS we add the suffix -es:

brush = brushES teach = teachES wash = washES go = goES do = doES fix = fixES kiss = kissES

c) Verbs ending in consonant + Y, we drop - Y, and add -iES:

d) Vei	rbs ending	in a	vowel	+Y, ac	id only	the	suffix -	-S:
--------	------------	------	-------	--------	---------	-----	----------	-----

- 1. Write the following sentences interrogative and negative:
 - Mr. Smith goes to work at 8 o'clock.
- a) Does Mr. Smith go to work at 8 o'clock?
- b) Mr. Smith doesn't go to work at 8 o'clock.
- 1. Mr. Smith works in a factory outside the town.
- 2. Mary goes to the University by bus.
- 3. Mrs. Taylor lives about two miles from town.
- 4. Every morning Ann meets her friends at the bus stop.
- 5. My mother wants to go to the doctor.
- 6. She does the work in the house.
- 7. They all come home at half past two.
- 8. These students work hard.
- 9. We all like to watch television.
- 10. I speak English well.
- 2. Change the subject:
 - 1. I go to my office in the morning. (He)
 - 2. The Smiths always go to the mountains in winter. (Mr. Smith's son)
 - 3. Do they have lunch at home or at a restaurant? (Mary)
 - 4. Their children play tennis. (Her child)
 - 5. I think you are quite right.(Your teacher)
- 3. Fill in the correct form of the verbs:

1.	the earth	(go) around the sun or th	e moon?
2.	Bees	(make) honey.	
3.	Vegetarians	(not eat) meat.	
4.	An atheist	(not believe) in God.	
5.	A liar is someone	e who (not tell) tru	uth.
6.	Where	rice (grow)?	

4.2 The Present Continuous Tense

The Present Continuous Tense is used:

The action happens at the time of speaking:

e.g. I am tired. I'm going to bed now.

The action happens around the time of speaking:

e.g. I'm reading an interesting book at the moment. I'll lend it to you when I finish.

The following adverbs are used – today, this week, this evening itd:

e.g. Is Susan working this week?

For the actions in progress:

e.g. Is your English getting better?

Affirmative form:

Subject	Auxiliary verb	Lexical verb	suffix
I	am	work	-ing
You	are	work	-ing
He/she/it	is	work	-ing
We/you/they	are	work	-ing

Interrogative form:

Auxiliary	Subject	Lexical verb	Suffix
verb			
Am	I	work	-ing
Are	you	work	-ing
Is	he/she/it	work	-ing
Are	we/you/they	work	-ing

Negative form:

Subject	Auxiliary verb	Lexical verb	Suffix
I	am not	work	-ing
you	are not (aren't)	work	-ing
he/she/it	is not (isn't)	work	-ing
We/you/they	are not (aren't)	work	-ing

Example sentences:

They are learning German. They are not learning German. Are they learning German? What are they learning?

1. Write the folloing sentences interrogative and negative:

The students are listening carefully.

- a) Are the students listening carefully?
- b) The students are not/aren't listening carefully.
- 1. John is putting his hat.
- 2. He is studying hard.
- 3. You are writing to William.
- 4. We are speaking English.
- 5. Fiona and Sebastian are looking for a new flat.

2. Put the correct form of the verbs in brackets:

1.	The children		about the	park. (run)
2.	My sister	bread in the kitchen. (cut)		
3.	What	you	at the university.	(study)
4.	Who		in the living room?	(sit)
5.	We		happy.	(feel)
6.	It		_dark.	(get)
7.	The tram		.	(come)
8.	I		a letter, I	my home-
	work. (not, w	rite/do)		

9.	Who	over there?		(stand)
10.	What	you	into your beg?	(put)

4.3 Present Simple vs Present Continous

Explain the differences:

The Present Simple Tense	The Present Continuous Tense
The water boils at 100 degrees	The water is boiling . Can you turn
celsius.	it off.
Excuse me, <u>do</u> you <u>speak</u> Eng-	What language <u>are</u> they <u>speaking</u> ?
lish.	
What do you do ?	What <u>are</u> you <u>doing</u> ?
I always go to bed before mid-	<u>I'm going</u> to bed now.
night	
Most people <u>learn</u> to swim when	Maria is on holiday. She is learn-
they are children.	<u>ing</u> to swim.
My parents <u>live</u> in London. They	I'm living with my friends until I
have lived there all their lives.	find a flat.

5. The Past Simple vs The Past Continuous Tense

5.1. The Past Simple Tense

The Past Simple Tense is used

For an action which happened at the exact time in the past.

She **got up** at 7 o'clock yesterday.
This film **wasn't** very good. I **didn't enjoy** it.
How **did** you **learn** to drive?
Where **did** you **go**?
I **didn't sleep** very well. I **slept** only 15 minutes.

The adverbs used with past simple tense:

yesterday, last week, in 1994, when I was seven, ago...

To be

I/ he/she/it	was
we/you/they	were

Example sentences:

I <u>was</u> angry because they <u>were</u> late. She <u>was not</u> at home. <u>Was</u> the weather good when you <u>were</u> on holiday? Where <u>were</u> you yesterday?

Affirmative form:

Subject	Lexical verb	Suffix
I/you/he/she/it/we/they	work	-ed

Interrogative form:

Auxiliary verb	Subject	Lexical verb	Suffix
did	Sva lica	work	/

Negative form:

Subject	Auxiliary verb + not	Lexical verb	Suffix
Sva lica	did not (didn't)	work	/

Example sentences:

I worked hard last week. You did not (didn't) work hard. Did she work hard yesterday? Where did you travel yesterday?

Regular verbs

Regular verbs get the suffix –ed: talk-ed
The last consonant is doubled after the short and stressed syllables: admit-ted; travel-led
The letter -y preceded by a vowel changes into -i: hurry-hurried

Make these verbs past simple:

push	
carry	
cycle	

drop	
follow	
play	
empty	
close	
dial	
sail	

Irregular verbs

Irregular verbs have a special form in past tense.

Write/*wrote*/written Read/*read*/read Buy/*bought*/bought

Example sentences:

You wrote a letter.
We didn't write a letter.
Did he write a letter?
What did he write about?

1. Make the following sentences interrogative and negative:

I saw him yesterday.

- a) Did you see him yesterday?
- b) I didn't see him yesterday.
 - 1. He left at three o'clock.
 - 2. I bought this dress in a big store.
 - **3.** They went to the seaside last month.
 - **4.** She travelled alone in 1982.
 - **5.** They came a t seven o'clock.
 - **6.** He heard a good news a minute ago.
 - 7. He arrived before you.
 - **8.** He forgot her name.
 - **9.** The child ate some sweets before lunch.
 - **10.** The girl gave me all the information I wanted.

2. Put the verbs in brackets into the Past Simple Tense:

Ι.	1	(get u	p) at seven o´clock.			
2.	She	(have) breakfast.				
3.	How long	you (stay) there?				
4.	Не	(not	go) out.			
5.	I	(walk) home after the party.				
6.	My father	(tell) me that.				
7.	They	(not sell)	the house.			
8.	My brother		(not be) in France in 1971.			
9.	When	_ your friend _	(arrive) last night?			
10.	My eldest daug	hter	(visit) Italy last summer.			

5.2. The Past Continuous Tense:

The Past Continuous tense is used:

For a past action in progress:

e.g. When you phoned, I was sleeping.

For two past actions happening at the same time:

e.g. He was doing homework while his sister was reading a book.

Affirmative form:

Subject	Auxiliary verb	Lexical verb	Suffix
I	was	work	-ing
you	were	work	-ing
He/she/it	was	work	-ing
We/you/they	were	work	-ing

Negative form:

I	was not	work	-ing
	(wasn't)		
you	were not (we-	work	-ing

	ren't)		
He/she/it	was not	work	-ing
	(wasn't)		
We/you/they	were not (we-	work	-ing
	ren't)		

Interrogative form:

Was	I	work	-ing
Were	you	work	-ing
Was	he/she/it	work	-ing
Were	we/you/they	work	-ing

Example sentences:

She was making beds. She was not making beds. Was she making beds?

1. Make the following sentences interrogative and negative:

My pet was digging the hole.

- a) Was my pet digging the hole?
- b) My pet wasn't digging the hole.
- 1. Julie was sleeping at three o'clock.
- 2. My parents were planning a holiday.
- 3. Mr. Peterson was walking in the garden.
- 4. Nurses were cleaning the equipment when the patient arrived in the hospital.
- 5. A very ill patient was waiting in the waiting room.
- 2. Put the verbs in the Past Continuous Tense.

1.	1	(cook) dinner.
2.	The sun	(shine)
3.	The door bell	(not ring).
4.	She	(not sit) by the window.

5you (wait) for		(wait) for m	y call yes	terday af-			
	teri	noon)				
6.	Wł	ıy		Sophia		(try)	to phone
	hin			.		` • • • • • • • • • • • • • • • • •	•
3. Pı	it th	e veri	bs in the co	rrect past te	nse, simple or c	ontinuous	s:
		_		, ,		_	
	1.			(meet) or	ur teacher whe	n I	
			to town.				
	2.				_ (shine) when	I	
		(go)	out.				
	3.	Whe	n mother		(enter) the	room the	e children
				(sle	ep).		
	4.	Peter	r		(set) the table re) the lunch.	e while	his moth-
		er		(prepa	re) the lunch.		
	5.	This	time yester	rday I	(d	o) my hoi	mework.
	6.	The	teacher		(read) the r	new lesso	n and the
		stude	ents	(lis	ten) to him atter	ntively.	
	7.	Whe	n he	(work) he		(break)
		his a	rm.				
	8.	My	son		(hold)a	lighter	when it
				(explod	le) and	(t	ournt) his
		hand					
	9.	Ι		(get o	ut) of the car	when i	ny father
					ne door and _		
		(brea	ak) my fing	ger.			
	10.	My	mom		(get) dı	ressed v	when she
					(h		
	11.				ten) to music,		
					whistling in		
				(go) deaf.		•	
	12.	I		_ (1	run) in the p	oark, and	d a man
				(chase)	me and	(pı	unch) me.
				`			/

6. The Present Perfect vs the Past Perfect Tense

6.1. The Present Perfect Tense

Affirmative form:

Subject	Auxiliary verb	Lexical verb	Suffix
I	have	visit	-ed
you	have	visit	-ed
he/she/it	has	visit	-ed
we/you/they	have	visit	-ed

Interrogative form:

Auxiliary verb	Subject	Lexical verb	Suffix
Have	I	visit	-ed
Have	you	visit	-ed
Has	he/she/it	visit	-ed
Have	we/you/they	visit	-ed

Negative form:

Subject	Auxiliary verb	Lexical verb	Suffix
	+ not		
I	have not (ha-	visit	-ed
	ven't)		
you	have not (ha-	visit	-ed
	ven't)		
he/she/it	has not (hasn't)	visit	-ed
we/you/they	have not (have't)	visit	-ed

Example sentences:

You have seen a lot of interesting places. You haven't seen many interesting things in Paris. Have you seen any Chinese movies? What have you seen in Turkey this summer? Irregular verbs take the forms of past participle:

```
Take / took / taken
Come / came / come
Bring / brought / brought

I have lost my key.
She has forgotten to tell him.
We haven't been to Germany yet.
She hasn't done her essay.
Have you driven a motorbike?
Has he seen Mary today?

(lose, lost, lost)
(forget, forgot, forgotten)
(be, was\were, been)
(do, did, done)
(drive, drove, driven)
(see, saw, seen)
```

The Present Perfect Tense is used

When the action happened in the past but the result is felt in the present moment

```
e.g. I have lost my keys. (Ključeve nemam sada)
```

- e.g. I have forgotten his name. (Sada ne znam njegovo ime)
- e.g. Have you seen my bag? (Da li znaš gde je sada?)

When an action happened in the near past and when we want to break a news.

```
e.g. Ow. I've cut my finger. (I have = I've) e.g. There has been an accident.
```

The Present Perfect is used with the adverbs JUST, ALREADY and YET.

```
e.g. I have just had lunch.
```

- e.g. He has already gone home.
- e.g. Has it stopped raining **yet**? (-yet is used in negative and interrogative sentences)

When we talk about our experience. It is not important when but what happened.

- e.g. I have eaten caviar.
- e.g. We've never had a car. (we have = we've)
- e.g. This is the most boring film I have ever seen.
- e.g. I haven't read Shakespeare's plays.

The time of an action is defined with SINCE and FOR.

- e.g.. I haven't eaten anything **since** breakfast.
- e.g. She has lived here **for** nine years.

When an action happened at the time which has not ended: this week, today, this term...

- e.g. I have drunk four cups of coffee today.
- e.g. Have you had a holiday this year?
- e.g. I haven't seen Tom this morning. Have you?

Notice:

Have you had any visitors? (from past time to present time) She first saw a psychiatrist two years ago. (past time)

1. Make the sentences interrogative and negative:

I've bought a new suit.

- a) Have you bought a new suit?
- b) I haven't bought a new suit.
- 1. I've come to school without my glasses.
- 2. He has spent all his money.
- 3. Tom's gone out.
- 4. We've been awfully busy this month.
- 5. It's been very cold this summer.
- 2. Put the verbs in the Present Perfect Tense:

1. I	(not, meet) him before.
2. She	(not, see) him recently

s is the first time I_	(drive) a car.	
you ever	(play) tennis?	
ey	(arrive) from London.	
w longy	(arrive) from London. our mother (be) in hospital?	
	(not have) a holiday for five years.	
derline the correct fo	orm of the verb in these sentences:	
	ve you read the case notes yet?	
The first time we	net / 've met was three years ago.	
I saw / 've seen yo	u six time this year.	
	arted / did you start having these thoughts?	
	In't have hallucinations since last year?	
•	e just finished all the tablets you gave me.	
She had / 's had a	breakdown in 2005.	
I didn't finish / ha	ven't finished taking your pulse yet.	
TT /- /- /	D. 1	
	Did you take your medication yesterday?	
I knew / 've know	n Mr. Musel for over ten years now. se or Past Simple Tense:	
I knew / 've know Present Perfect Ter The patient	n Mr. Musel for over ten years now. se or Past Simple Tense: (take) an overdose last Christma	as.
I knew / 've know Present Perfect Ter The patient you eve	n Mr. Musel for over ten years now. se or Past Simple Tense: (take) an overdose last Christman (have) hallucinations?	as.
I knew / 've know Present Perfect Ter The patient you eve I	m Mr. Musel for over ten years now. se or Past Simple Tense: (take) an overdose last Christman f(have) hallucinations? (miss) two doses so far this week.	
I knew / 've know Present Perfect Ter The patient you eve I How many differe	m Mr. Musel for over ten years now. se or Past Simple Tense:	?
The patient you eve I How many differe I hope you	m Mr. Musel for over ten years now. se or Past Simple Tense: (take) an overdose last Christman f(have) hallucinations? (miss) two doses so far this week.	?
The patient you eve I How many differe I hope you wait)	m Mr. Musel for over ten years now. se or Past Simple Tense:	?
The patient you eve I How many differe I hope you wait)	m Mr. Musel for over ten years now. se or Past Simple Tense:	?
The patient you eve I How many differe I hope you wait) Come to see what They	m Mr. Musel for over ten years now. se or Past Simple Tense:	?
The patient you eve I How many differe I hope you wait) Come to see what They ju	m Mr. Musel for over ten years now. se or Past Simple Tense:	?
The patient you eve I How many differe I hope you wait) Come to see what They They ju Father ju	m Mr. Musel for over ten years now. se or Past Simple Tense:	? not
The patient you eve I How many differe I hope you wait) Come to see what They They ju Father ju	m Mr. Musel for over ten years now. se or Past Simple Tense:	? not
The patient you eve I How many differe I hope you wait) Come to see what They ju Father Who party? (help)		? not
The patient you eve I How many differe I hope you wait) Come to see what They They ju Father Who party? (help) I In word or wait.	m Mr. Musel for over ten years now. se or Past Simple Tense:	? not
The patient you eve I How many differe I hope you wait) Come to see what They They ju Father Who party? (help) I last year. (not be/b	m Mr. Musel for over ten years now. se or Past Simple Tense:	? not

6.2. The Past Perfect Tense

Affirmative form:

Subject	Auxiliary verb	Lexical verb	
I/you/he/she/it/we/they	had	-ed/past participle	

Interrogative form:

Auxiliary verb	Subject	Lexical verb
Had	I/you/he/she/it/we/they	-ed/past participle

Negative form:

Subject	Auxiliary verb + not	Lexical verb
I/you/he/she/it/we/they	had not (hadn't)	-ed/past participle

Example sentences:

She had arrived just before the film started. She hadn't arrived on time. Had she arrived before him yesterday?

The Past Perfect Tense is used

When the action happened before another past action.

- e.g. When Sarah arrived at the party, Peter had already gone home.
- e.g. After the train had left the station, she felt sad and lonely.
- e.g. As soon as he had said the truth, he regretted it.

1	Put the ve	erbs in the Past Perfect Tense affirmative:
	1.	The pupils talked about the film they (watch).
	2.	I was late for work because I(miss) the bus.
	3.	We lived in the house that my father(build).
	4.	We admired the picture that Lucy (paint).
	5.	They watered the trees that they (plant).
2.	. Put the	verbs in the Past Perfect Tense negative:
1.	In the sl not) for	nopping centre, I met a friend who I (see / ages.
2.		ief could walk right into the house because you (lock / not) the door.
3.	We lost days bet	the match because we (practice / not) the fore.
4.		nool, Jim quickly copied the homework that he (do / not).
5.		at a restaurant last night because I (buy / thing for dinner.

1.		(what / Bob / do) that he was kent in
1.	after school?	(what / Bob / do) that he was kept in
2.	to the theatre?	(you / eat) anything before you went
3.	moved to Glasgow?	(he / live) in London before he
4.		(she / find) a new job by that time?
5.	went to Dublin?	(they / book) a room before they
	(want) to learn [(spend) his holiday in Italy, he Italian. Dad at work before she
(leave	e) for her trip. tan (turn o	n) the radio after she (wash)
	hen she (arrive), the match already
		(come), he (feed) the
5. Aft cat.		

7. She (watch) a vide (go) to bed.	eo after 1	the chi	ildren		
8. After he (m (phone) his friend.	ake) bre	eakfast	, he		
9. I (be) very tired be much.	ecause I			(study	v) too
10. The doctors (review) the	(visit)	their	patients	after	they
patients' records.					

7. The Future Tenses

7.1. The Present Continuous

The Present Continuous Tense is used to express a planned future action.

- e.g. What are you doing on Saturday evening?
- e.g. I'm going to the theatre.
- e.g. Alex is getting married next month.

7.2. The Present Simple Tense

The Present Simple Tense is used to express future actions as part of a time table or a schedule, for example when classes happen, when busses arrive or leave, shops open or close etc.

- e.g. The train leaves at 11.05 pm and arrives at 12.35 pm.
- e.g. What time does the film start?
- e.g. What time do you start work tomorrow?
- e.g. The delegation arrives at 6.00 pm.

1. Put in the correct tense:

1.	We	(have) a p	arty next Saturday.	
2.	The art	exhibition	(open) on 3 May.	
3.	We	(go) to a c	oncert tonight. It	(begin) at 7.30
4.	When	this film	(finish) ?	
5.	What _	you	(do) tomorrow?	

7.3. 'be going to'

This form is used when we are making decisions.

- e.g. I am going to clean the windows.
- e.g. She is going to stop smoking.
- e.g. This food looks horrible. I'm not going to eat it.

It is also used when we are predicting what is going to happen according to the present situation, and when we are drawing conclusions.

- e.g. Look at those black clouds. It is going to rain.
- e.g. I feel terrible. I 'm going to be sick.

1. Put in the correct tense:

- 1. What____ (you, do) with that money?
- 2. Where (you, put) your new table?
- 3. There is a hole in the bottom of the boat. The boat (sink).

7.4. will / shall and won't / shan't

'will' is used for predictions, for example for weather forcast, fortunetelling etc.

- e.g. The sun will rise at 6.30 tomorrow
- e.g. In the year 2050 all students will have their own computers in
- e.g. Will it snow for Christmas?

'will' is used for a decision made at the time of speaking.

- e.g. Oh, I left the door open. I'll go and shut it.
- e.g. What would you like to drink? I'll have an orange juice, please.
- e.g. Did you phone Ruth? Oh. No, I forgot. I'll phone her now.

'will' is usually used after the expression 'I think I'll'

- e.g. I feel hungry. I think I'll have something to eat.
- e.g. I don't think I'll go out tonight. I'm too tired.

'will' is used when we offer our assistance.

e.g. That bag looks heavy. I'll help you with it.

'will' and 'won't' is used for making promices.

e.g. I won't tell anyone what happened. I promise.

e.g. Thanks for lending me the money. I'll pay you back on Friday.

'will' in interrogative sentences is used to ask someone a favor.

e.g. Will you please be quiet? I'm trying to concentrate.

'Shall I?' and 'Shall we?' is used when we ask for someone's approval and agreement.

- e.g. Shall I open the window?
- e.g. Shall we go? Just a minute. I'm not ready yet:
- 1. Underline the correct part of the sentence:
 - 1. It's a secret between us. I promise, *I don't tell / I won't tell* anybody.
 - 2. I don't want to go out alone. *Do you come / Will you come* with me?
 - 3. Are you doing / Will you do anything tomorrow evening?
 - 4. What time does your train leave/will your train leave tomorrow?
 - 5. I'm having / I'll have a party next Saturday. I hope you can come.
- 2. Write the verbs in a correct form to express future actions:

1. The train	at 11:45. (<i>leave</i>)
2. We	dinner at a nice restaurant on Saturday. (
have)	
3. It	_ in the mountains tomorrow evening. (
snow)	
4. On Sunday at 8 o'cloc	ck I my friend. (meet)
5. They	to London on Friday evening. (fly)
6. Wait! I	you to the station. (drive)
7. The English lesson	at 8:45. (start)
8. I r	ny sister in April. (see)
9. Look at the clouds –	it in a few minutes. (
rain)	

	10. Listen! There's someone at the door. Ithe or you. <i>(open)</i>
3. Wri	te 'will' or 'be going to' in the following sentences:
1.	A: Why are you holding a piece of paper? B: I (write) a letter to my friends back home in Texas.
2.	A: I'm about to fall asleep. I need to wake up! B: I (get) you a cup of coffee. That will wake you up.
3.	A: I can't hear the television! B: I (turn) it up so you can hear it.
4.	We are so excited about our trip next month to France. We(visit) Paris, Nice and Grenoble.
5.	Sarah (come) tothe party. Oliver (be) there as well.
6.	Ted: It is so hot in here! Sarah: I (turn) the air-conditioning on.
7.	I think he (be) the next President of the United States.
8.	After I graduate, I (attend) medical school and become a doctor. I have wanted to be a doctor all my life.
9.	A: Excuse me, I need to talk to someone about our hotel room. I am afraid it is simply too small for four people. B: That man at the service counter (help) you .
	As soon as the weather clears up, we (walk) down to the beach and go swimming

8. The Passive Voice

The Active vs Passive Voice

The active voice is used when we want to say what the subject does.

- e.g. My grandfather was a builder. He built this house in 1930.
- e.g. It is a big company. It employs two hundred people.

The passive voice is used when we want to say what happens to the subject.

- e.g. This house is quite old. It was built in 1930.
- e.g. Two hundred people are employed by the company.

In passive sentences it is often irrelevant who is the doer of the action. The doer is unknown or it is implied.

e.g. A lot of money was stolen in the robbery.

If we want to say who the doer of the action is we use 'by' phrase.

e.g. This house was built by my grandfather.

ACTIVE SENTENCE STRUCTURE			
DOER	VERB	OBJECT	ADVERBIALS
Somebody	cleans	this room	every day

PASSIVE SENTENCE STRUCTURE				
SUBJECT	TO BE	VERB	ADVERBIAL	BY
(obj)		(past parti-		PHRASE
		ciple)		(the doer)
This room	is	cleaned	every day	by the
				cleaners

Tense changes:

PRESENT SIMPLE:

Somebody steals cameras from hotel rooms.

Cameras are stolen from hotel rooms.

PAST SIMPLE:

Somebody stole my camera from my hotel room.

My camera was stolen from my hotel room.

PRESENT PERFECT:

Somebody has stolen my camera.

My camera has been stolen.

PAST PERFECAT:

Somebody had stolen my camera before I came in the room.

My camera had been stolen before I came in the room.

MODAL VERBS:

They must do something before it's too late.

Something must be done before it's too late.

Notice!

Tense changes of the verb 'to be'

PRESENT SIMPLE > is, are, am PAST SIMPLE > was, were

PRESENT PERFECT > has been, have been

PAST PERFECAT > had been must be will be

1. Write these active sentences passive:

- 1. Somebody cleans this room twice a week.
- 2. Somebody cleaned the room yesterday.
- 3. They have cancelled the concert.
- 4. Children use computers in schools.
- 5. Somebody recorded our conversation.
- 6. We found that they had cancelled the game.

- 7. They have built a new hospital.
- 8. The boss promoted Bill last week.
- 9. Water covers most of the Earth's surface.
- 10. People can use this road now.

2. Write the sentences interrogative using the words given:

Ι.	caught the thieves were	
		_?
2.	written are the tests always in the language lab	
		_ ?
3.	my apology be accepted will	
		_?
4.	eagles in Alaska are found	
_		_?
5.	was the Eiffel Tower in 1889 for the World Exhibition built	0
_	1 11 1 4 314 1	_?
6.	replaced be by computers will the workers	9
7	can be beans and carrots together cooked	_'
/.	can be beans and carrots together cooked	9
R	the first underground railway where opened was	_ '
0.	the first underground fairway where opened was	9
9.	was seen yesterday the accident by the police	
	The state of the s	?
10.	to the school returned be are the books going to	
	2 2	?
11.	taken been to hospital has she	
		_?

9. Conditional Sentences

Conditional sentences are used to express that the action in the main clause (without 'if') can only take place if a certain condition in the clause with 'if' is fulfilled.

There are three types of conditional sentences:

Type one

IF+SUBJ+PRESENT SIMPLE	SUBJ + WILL + INFINITIVE
If I find your watch,	I will tell you.

Example sentences:

If <u>I find</u> your watch, <u>I'll tell</u> you. (Ako pronađem tvoj sat, rećiću ti.) If <u>it rains</u>, <u>we'll stay</u> at home. (Ako pada kiša, ostaćemo kod kuće.) If <u>she leaves</u> school, she <u>won't be</u> happy. (Ako napusti školu, neće biti srećna.)

Where <u>will you go</u> if <u>you visit</u> Rome? (interrogative sentence) They <u>will sell</u> the house if <u>they move</u> to Madrid? ('if' clause is the second clause)

Type two

IF + SUBJ + PAST SIMPLE	SUBJ + WOULD + INFINITIVE
If I found a wallet in the street,	I would take it to the police.

Example sentences:

- 1. If I found a wallet in the street, I would take it to the police. (Ako/Kada bih našla novčanik na ulici, odnela bih ga u policiju.)
- 2. I would be very frightened if somebody pointed a gun at me. (Bio bih veoma uplašen kada bi neko uperio pištolj u mene.)
- 3. What would you do if you won a million pound?

1. If she (buy) a new ca	r, she (travel) to Budapest.		
2. We(stay) on the beac			
3. Whatyou (do) if he _	(break) a window?		
_,,			
2. Write the sentencen in type two co	nditional:		
1. They (be) angry if I	(not go) to see them.		
2. If you (take) more exer	cise, you (feel) better.		
3. If I (sell) my car, I			
0.111(0.011) 1111y 0011, 1	_ (800)		
3. Write type one or two conditionals	s as appropriate:		
1. If we caught this train, we	(arrive) too early.		
2. If we (stay) in this hotel			
3. What would happen if I			
4. If I don't go to work tomorro			
Type three	· · /		
Type timee			
IF + SUBJ + HAD + past participle	SUBJ+WOULD+HAVE+past part.		
	SUBJ+WOULD+HAVE+past part. I would have told you.		
IF + SUBJ + HAD + past participle			
IF + SUBJ + HAD + past participle If I had known that,	I would have told you.		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have	I would have told you. told you. (Da sam to znala, rekla		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have bih ti.) 2. If I had had your address, I would imala tvoju adresu, poslala bih ti razg	I would have told you. told you. (Da sam to znala, rekla have sent you a post card. (Da sam glednicu.)		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have bih ti.) 2. If I had had your address, I would	I would have told you. told you. (Da sam to znala, rekla have sent you a post card. (Da sam glednicu.)		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have bih ti.) 2. If I had had your address, I would imala tvoju adresu, poslala bih ti razg	I would have told you. told you. (Da sam to znala, rekla have sent you a post card. (Da sam glednicu.) terview if he had missed the train.		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have bih ti.) 2. If I had had your address, I would imala tvoju adresu, poslala bih ti razg 3. He would have been late for his in	I would have told you. told you. (Da sam to znala, rekla have sent you a post card. (Da sam glednicu.) terview if he had missed the train. tio voz.)		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have bih ti.) 2. If I had had your address, I would imala tvoju adresu, poslala bih ti razga. He would have been late for his in (Zakasnio bi na intervju da je propus 1. Write the sentences in type three of	I would have told you. told you. (Da sam to znala, rekla have sent you a post card. (Da sam glednicu.) terview if he had missed the train. tio voz.) conditionals:		
IF + SUBJ + HAD + past participle If I had known that, Example sentences: 1. If I had known that, I would have bih ti.) 2. If I had had your address, I would imala tvoju adresu, poslala bih ti razg 3. He would have been late for his in (Zakasnio bi na intervju da je propus	I would have told you. told you. (Da sam to znala, rekla have sent you a post card. (Da sam glednicu.) terview if he had missed the train. tio voz.) conditionals: something.		

	money, I(not be) able to buy the
car. 4.I(go) home if I(be) tired.
The wish which can not be fulfille	d is expressed in the past tense.
e.g. I wish he were here	(Voleo bih da je tu.)
The wish which could not have be fect tense.	en fulfilled is expressed in the past per-
e.g. I wish he had been here	(Voleo bih da je bio ovde.)
2. Write the appropriate type of th	e conditional:
1. If we meet at 9:30, we	(have) plenty of time.
	she (look) in the fridge.
	ve punished her with a fine if she
4. If you spoke louder, your <i>stand)</i> you.	classmates (under-
5. Dan (<i>arrive</i>	e) safe if he drove slowly.
6. You (have your homework.	e) no trouble at school if you had done
7. If you (cold.	swim) in this lake, you'll shiver from
8. The door will unlock if yo button.	ou (press) the green
9. If Mel wered her questions.	(ask) her teacher, he'd have ans-
10. I(ca	all) the office if I were you.

10. The Reported Speech

10.1. Direct and Indirect Speech

Direct speech is a report of the exact words of a speaker or writer. Direct speech is usually placed inside quotation marks and accompanied by a reporting verb.

e.g. He said: "I like your new jacket."

Indirect speech is a report on what someone else said or wrote without using that person's exact words.

e.g. He said that he liked my new jacket.

Normally, the tense in reported speech is one tense back in time from the tense in direct speech.

10.2. Tense changes

Present simple tense > Past simple
Present continuous tense > Past continuous
Present perfect tense > Past perfect
Past simple > Past perfect
Past perfect > Past perfect
Past perfect > Past Perfect
Future simple, will > would

Modal verbs, may, can, must > might, could, had to

Example sentences:

e.g. He said: "I write letters." He said that he wrote letters.

e.g. He said: "He is listening to music" He said that he was listening to the music.

e.g. She said: "He has finished his work." She said that he had finished his work.

- e.g. He told me: "You answered correctly" He said to me that I had answered correctly.
- e.g. She said, "She had visited a doctor" She said that she had visited a doctor.
- e.g. He said: "I will not take the exam." I said that I would not take the exam.

10.3 Ansking Questions

There are two kinds of questions.

a. Yes/No questions

Do you like music? - Yes, I do. / No, I don't.

b. Wh questions
Where do you live? -

Where do you live? - I live in a small village in the south of England.

10.3.1. Yes/No questions

The verbs 'said' and 'tell' become 'ask, wonder, inquire, want to know...'

e.g. He **told** me:"Do you like music?"
He **asked** me if I liked music.

The word order is the same as in the affirmative sentence:

...**Do** you like...

' if' or 'whether' connect two clauses:

... **if** I liked...

Example sentences:

- 1. She said, "Will he participate in the quiz competition?" She asked me if he would participate in quiz competition.
- 2. I told him, "Are you feeling well?" I asked him if he was feeling well.
- 3. They told me, "Did you go to school?" They asked me if I had gone to school.
- 4. He told me, "Have you taken the breakfast?" He asked me if I had taken the breakfast.

10.3.2. Wh questions

The verbs 'said' and 'tell' become 'ask, wonder, inquire, want to know...'

He **said**: "How are you?" He **asked** me how I was.

The word order is the same as in the affirmative sentence:

... how I was. (Not, how was I)

Question word connects the two clauses:

... how I was.

Example sentences:

- 1. Teacher told him, "what is your name?" Teacher asked him what his name was.
- 2. She said to him, "why did you come late?" She asked him why he had come late.
- 3. He said, "when will they come?"

He asked when they would come.

4. She asked his son, "why are you crying?" She asked her son why he was crying

10.4. Imperatives

Particle 'to' connects the two clauses

He ordered me: "**Open** the door." He ordered me **to open** the door."

The verbs 'said' and 'tell' becomes 'asked, suggested, ordered, advised...'

Example sentences:

- 1. He said to me, "please help me" He *requested* me to help him.
- **2.** She told him, "you should work hard for exam" He *suggested* him to work hard for exam.
- **3.** They told him, "do not tell a lie" They said to him *not to* tell a lie.
- **4.** He said, "open the door" He *ordered* to open the door.
- **5.** The teacher said to the students, "do not waste time" The teacher **advised** the students not to waste time.
- **6.** He said, "please give me a glass of water" He **requested** to give him a glass of water.
- 7. The doctor said to me, "Do not smoke"

The doctor *advised* me not to smoke.

8. The teacher told him, "Get out" The teacher *ordered* him to get out.

Other changes:

```
here > there
this > that
these > those
now / just > than
yesterday > the day before / the previous day
tomorrow > the next day / the following day
next week > the next week / the following week
today > that day
tonight > that evening / that night
ago > before (two days ago - two days before)
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e.g. He said, "I will buy a book tomorrow"

He said that he would buy a book the next day.

1. Change the direct sentences into the indirect ones:

- 1. She said: "My brother is coming today".
- 2. They said: "We have just come."
- 3. She told me: "They arrived two days ago."
- 4. He said: "I'm very busy today, but if you come tomorrow, I'll be able to see you.
- 5. John said: "I left home long ago."
- 6. Tom asked me: "Are you staying in this hotel?"
- 7. She asked: "Can you come tomorrow?"
- 8. He asked me: "Will you come to the lecture?"
- 9. She wondered: "Do you speak Spanish?"
- 10. He wanted to know: "Did you attend the meeting?"
- 11. John told me: "Why don't you go home?" (ne zaboravite da promenite glagol *told*)

- 12. He said to the man: "Where are you going?"
- 13. I said: "Who went with you last year?" 14. She said: "What's your name?"
- 15. They said: "Why did you do that?"
- 16. He said: "Shut the door, please."
- 17. She said: "Don't shout!"
- 18. He said: "Go there at 4 o'clock, please."
- 19. She said: "Come as soon as possible so that we can have a nice long chat."
- 20. I said: "Be here in time."

PART 4

Translation

- 1. Govorite li španski?
- 2. Govorite li sada engleski ili nemački?
- 3. Šta tražite ovde?
- 4. Šta čekaju ovi ljudi?
- 5. Nastavnik predaje novu lekciju, a studenti ga slušaju.
- 6. Više ne pada kiša, sada sija sunce.
- 7. Da li njena sestra predaje engleski u ovoj školi?
- 8. Oni uvek ručaju u pola dva.
- 9. Ovaj autobus staje ispred naše kuće.
- 10. Gospodin Green uvek stiže prvi na posao.
- 11. On želi da razgovara s vama.
- 12. Ne slažem se s vama.
- 13. Zar ne prepoznajete njegov rukopis?
- 14. Znam to odavno.
- 15. Poznajemo se već godinama.
- 16. Koliko dugo ste ovde?
- 17. Koliko je već vremena bez svesti?
- 18. Kada sam bio na moru, sunčao sam se svako pre podne.
- 19. Kadgod sam išao u pozorište, sedeo sam na najjeftinijim mestima.
- 20. Posetio je London pre nekoliko godina.
- 21. Većina naših manastira sazidani su u Srednjem veku.
- 22. Šta ste juče radili?
- 23. Kad sam stigao kući, deca su gledala televizijski program.
- 24. Kada sam polazio iz kancelarije, telefon je zazvonio.
- 25. Šta ste radili celog jutra juče?
- 26. Trčali su što su brže mogli da bi uhvatili voz.
- 27. Prošle godine u ovo vreme živeli smo u Kembridžu.
- 28. Predavač je objašnjavao to pitanje, a student su slušali pažljivo (attentively).

- 29. Ove nedelje sam dva puta pao ispit.
- 30. Potrošio je sav svoj novac.
- 31. Izašao je.
- 32. Čuo sam tu vest.
- 33. Nismo je videli ovog meseca.
- 34. Ovog meseca smo bili u strašnom poslu (awfully busy).
- 35. Kada smo stigli, utakmica je već počela.
- 36. Čim su završili doručak, deca su istrčala u dvorište.
- 37. Nisam učio srpski pre nego što sam stigao u Srbiju.
- 38. Napravila je mnogo grešaka pre nego što je shvatila šta radi.
- 39. Rekli su mi da je John vrlo umoran.
- 40. On je pitao da li studenti govore engleski.
- 41. Pitala me je kako se zovem.
- 42. Hteli su da znaju ko sam.
- 43. Rekao je da će doći na ručak.
- 44. Rekao je da sutra putuje za Italiju.
- 45. Rekli su nam da požurimo.
- 46. Rekla je da će se vratiti za dva sata.
- 47. Ako je slobodan, poćiće sa nama.
- 48. Ako ne požurite, zakasnićete.
- 49. Kuda ćemo ih voditi ako dođu sledeće nedelje?
- 50. Kada bi sad stigao, rekao bi nam šta da radimo.
- 51. Šta biste rekli kada bih prihvatila ovu ponudu?
- 52. Da sam na tvom mestu, ja to ne bih rekao.
- 53. Da ste bili na sastanku, vi biste ga videli.
- 54. Uhvatio bi autobus da je brže išao.
- 55. Da su znali da ste ovde, odmah bi došli.
- 56. Želeo bih da znam ime tog čoveka.
- 57. Voleo bih da nam kažu istinu.
- 58. Voleo bih da sam znao njegovu adresu kada sam bio u Londonu.
- 59. Voleo bih da sam to video.
- 60. Voleo bih da smo znali šta da uradimo.