
情境模拟： Chapter 4 Unit 1 Dialogue 3 as RN Alana

采用教材：《涉外护理英语情境对话》，刘晨，外语教学与研究出版社

Dialogue 3: Insulin Therapy

(Mr. Moore is to be discharged from the hospital tomorrow. Dr. Taylor ordered insulin therapy education to be given to the patient before discharge. RN Alana gives instructions regarding insulin therapy.)

RN Alana: _____

Mr. Moore: Great! Thank you, Alana.

RN Alana: _____

Mr. Moore: I have to prick my fingers every day?

RN Alana: _____

Mr. Moore: A lot of needle sticks, ha?

RN Alana: _____

Mr. Moore: OK.

RN Alana: _____

(RN Alana gets the glucometer ready. Mr. Moore uses a lancet to prick one of his fingers.)

RN Alana: _____

(Several seconds later, the blood sugar reading displays on the screen.)

RN Alana: _____

(RN Alana reads the medication administration record for the insulin order.)

RN Alana: _____

Mr. Moore: OK.

(RN Alana leaves the room, and then comes back with the supplies.)

RN Alana: _____

(Mr. Moore holds the syringe.)

RN Alana: _____

Mr. Moore: That's serious

RN Alana: _____

Mr. Moore: OK.

(RN Sandra is asked to come in to check the insulin.)

RN Sandra: Hi.

Mr. Moore: Hi.

RN Sandra: 6 units?

RN Alana: _____

RN Sandra: Good.

RN Alana: _____

(Mr. Moore performs the injection following RN Alana's instructions.)

RN Alana: _____

(RN Alana brings the lunch tray for Mr. Moore.)

RN Alana: _____

Mr. Moore: OK.

RN Alana: _____

Mr. Moore: All right.

RN Alana:

Mr. Moore: All right. Thank you.

RN Alana:

复旦大学2016年度校级精品课程

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Dialogue 3: Insulin Therapy

(Mr. Moore is to be discharged from the hospital tomorrow. Dr. Taylor ordered insulin therapy education to be given to the patient before discharge. RN Alana gives instructions regarding insulin therapy.)

RN Alana: Mr. Moore, to make sure everything will be OK with you at home, I am going to give you instructions on insulin therapy, OK?

Mr. Moore: _____

RN Alana: Sure. First, you need to check your blood glucose level according to the prescribed time and frequency.

Mr. Moore: _____

RN Alana: Probably 3 to 4 times a day. You will see the exact prescription tomorrow.

Mr. Moore: _____

RN Alana: Right. Glucose monitoring is one of the best ways to evaluate how well you control your blood sugar. You will have to convince yourself to do the needle sticks because this will help you control your diabetes.

Mr. Moore: _____

RN Alana: All right. Now I'm going to set up the glucometer. I want you to prick your fingertip and collect the blood sample for testing.

(RN Alana gets the glucometer ready. Mr. Moore uses a lancet to prick one of his fingers.)

RN Alana: Good. Put your hand down a little bit. This will help the blood come down to your fingertip. Or you can massage the finger from the base to the tip. OK, this is nice little drop of blood. Apply the blood drop to the testing strip.

(Several seconds later, the blood sugar reading displays on the screen.)

RN Alana: OK. It's 210. That's a little high. Let's check the doctor's order to see how much insulin you will need before lunch.

(RN Alana reads the medication administration record for the insulin order.)

RN Alana: You will need 6 units of regular insulin before lunch according to the sliding scale that the doctor ordered. The lunch trays are coming to the floor. Let's get ready for the shot. I'll bring the syringe and insulin for you and let you do the shot, OK?

Mr. Moore: _____

(RN Alana leaves the room, and then comes back with the supplies.)

RN Alana: Get the syringe, Mr. Moore. I'll let you draw 6 units of insulin from the bottle.

(Mr. Moore holds the syringe.)

RN Alana: Use the alcohol wipe to clean the top of the bottle first. Draw 6 units of air into the syringe. Yes. OK, inject the air into the bottle. Now, draw up 6 units of insulin into the syringe. Check if it is exactly 6 units. Let me see it. Hold on, I will have another licensed staff check the dose for you. Two licensed nurses must check the dose before administering insulin.

Mr. Moore: _____

RN Alana: Yes. But when you are at home, you don't usually have others to check the amount for you. You need to be very careful to draw the correct amount, OK?

Mr. Moore: _____.

(RN Sandra is asked to come in to check the insulin.)

RN Sandra: Hi.

Mr. Moore: Hi.

RN Sandra: 6 units?

RN Alana: Yes, 6 units, regular.

RN Sandra: Good.

RN Alana: Thank you, Sandra. Now, Mr. Moore, I want you to clean your abdomen where you are going to give yourself the injection. Use the alcohol wipe. Good. Pinch the skin that you just cleaned. Inject the needle into the skin at a 90-degree angle. Push the end of the plunger to send the insulin into your body.

(Mr. Moore performs the injection following RN Alana's instructions.)

RN Alana: OK, now slowly withdraw the syringe. Press the injection site into an alcohol wipe for a little bit. Good. The insulin you just had is regular insulin, which has a rapid onset. So you should eat your lunch within 15 minutes to avoid hypoglycemia, as well as to make full use of the insulin. I'll get the tray for you.

(RN Alana brings the lunch tray for Mr. Moore.)

RN Alana: Mr. Moore, when you are at home doing your self-injection, do make sure you are giving the right type of insulin with the right amount.

Mr. Moore: _____

RN Alana: If you feel dizzy, sweaty, or hungry after the injection of insulin, you need to eat something right away. You might be experiencing low-blood sugar. It's very dangerous when your blood sugar drops too low. If the blood sugar level is low, you might need to take glucose tablets.

Mr. Moore: _____

RN Alana: Dr. Taylor might want to have blood drawn from your veins several times a year to check how well the blood glucose is controlled. He will tell you how often you need to make appointments with him.

Mr. Moore: _____

RN Alana: You are welcome.