
情境模拟： Chapter 5 Unit 3 Dialogue 2 as Dr. Miller

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: Setting Plaster on a Leg Fracture

(In the operation room, RN Lena is assisting Dr. Miller to put a cast on patient Ms. Kimberly with a leg fracture. Mrs. Kimberly is asleep under general anesthesia.)

Dr. Miller: _____

RN Lena: She is out, doctor.

Dr. Miller: _____

RN Lena: How hard do you have to pull?

Dr. Miller: _____

RN Lena: Am I doing it all right?

Dr. Miller: _____

RN Lena: OK, the edges of the casts should be padded to prevent pressure sores, shouldn't they?

Dr. Miller: _____

RN Lena: What about X-rays?

Dr. Miller: _____

RN Lena: Well, if there is marked swelling of the foot, we should split the cast throughout its full length using a cast saw, along either the lateral or medial border, or even along both sides if necessary. With a newly applied plaster cast, the leg should be elevated on a pillow, and the patient should be kept in bed for at least three days.

Dr. Miller: _____

RN Lena: Yes. Pay careful attention to the circulation in the limb by observing the color of the toes. It's also important to make sure the toes are moving and that there's

no severe pain. If there is a problem the doctor has to be called right away, and the cast may need to be split.

Dr. Miller: _____

RN Lena: Doctor Miller, I wonder when the patient will be able to walk?

Dr. Miller: _____

RN Lena: And during these early weeks, X-rays are taken regularly to make sure that the reduction is maintained?

Dr. Miller: _____

复旦大学2016年度校级精品课程

情境模拟： Chapter 5 Unit 3 Dialogue 2 as RN Lena

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: Setting Plaster on a Leg Fracture

(In the operation room, RN Lena is assisting Dr. Miller to put a cast on patient Ms. Kimberly with a leg fracture. Mrs. Kimberly is asleep under general anesthesia.)

Dr. Miller: Now, Lena, Ms. Kimberly has a displaced fracture of her tibia and fibula, and I am going to show you how I set it. We'll run through the procedure from the beginning. First of all, of course, we give the anesthetic.

RN Lena:

Dr. Miller: Right. Once the patient is asleep, we apply stockinet to the full length of the affected limb. Watch now how this is done. There. Now if you would just like to put your hand behind her knees and wrap your fingers together and lift it upward-----so I will apply traction to the lower part of the leg, like this, to correct the shortening and any malrotation that may have occurred.

RN Lena:

Dr. Miller: Well, not too hard. The anesthetic makes the patient very relax. You can actually use the weight of the leg itself to provide a fair amount of traction. Now keep on pulling while I wrap cotton roll padding around the leg the thigh, and add extra padding on all the bony prominences. Good, now we can put the plaster on. We begin by putting the casting plaster on from just below the knee to below the toes. We leave the top of the toes exposed. Once you've molded the plaster, you can stop pulling and allow it to set.

RN Lena:

Dr. Miller: Yes! Now I will straighten the knee and hold it in a position of 15 degree's flexion while we extend the plaster to the upper third of the thigh. Remember to use the palm of the hand, not the fingers, to support the wet cast.

RN Lena:

Dr. Miller: That's right.

RN Lena:

Dr. Miller: We take X-rays straight away, and if the reduction of the fracture is unsatisfactory, we need to remove the cast and reduce the fracture again. Now, what sort of things should we look out for, Lena, in the first few days after the plaster has been applied?

RN Lena:

Dr. Miller: Anything else?

RN Lena:

Dr. Miller: Excellent.

RN Lena:

Dr. Miller: She'll be able to walk with crutches after the first few days, but the limb will have to be immobilized until adequate bone union occurs. In some cases a walking piece may be applied to the heel after the first 6 weeks, provided of course the bones have healed enough. And during the healing process, the cast tends to loosen as swelling subsides, so we might have to remove this one and reapply a new one.

RN Lena:

Dr. Miller: Quite right. Well, thank you for your assistance, Lena.

复旦大学2016年年度精品课程