<<剑桥医学英语>>

图书基本信息

书名:<<剑桥医学英语>>

13位ISBN编号:9787115221223

10位ISBN编号:7115221227

出版时间:2010-1

出版时间:人民邮电

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页数:175

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内容概要

《剑桥医学英语》是力学习医学且具有中高级英文水平的学习者设计的,它提供的医学专业英语,有助于提高学习者对医学期刊,书籍的阅读水平,帮助医学工作者或学生参加医学国际会议,或到讲英语的国家作短期海外实习,此书可作为自学的学习资料,也可以作为课堂教学的课本,既可一对一来学习还可以学习小组的形式来学习。

本书由60个双页主题单元组成,前46个主题涵盖了医学领域的方方面面,从健康、疾病到调查研究。

其余的14个单元侧重于介绍有关医学的沟通技能。

每一个单元的左手边页,详细地解释了关键词和表达方式;右手边页上的一系列练习则会帮助学习者检查和进一步理解所学到的知识。

书的后面附有练习答案和附录。

本书最有特色的地方是每一单元都设计有"请你参与"部分。 这为每一位学习者提供了情景模拟的机会,可以将学习到的新词汇和表达法用到自己相关的医学专业 领域中去,因而对新知识可以更好地消化和吸收。

<<剑桥医学英语>>

书籍目录

INTRODUCTION

BASICS

- 1 Health and illness
- 2 Parts of the body 1
- 3 Parts of the body 2
- 4 Functions of the body

MEDICAL AND PARAMEDICAL PERSONNEL AND PLACES

- 5 Medical practitioners 1
- 6 Medical practitioners 2
- 7 Nurses
- 8 Allied health professionals
- 9 Hospitals
- 10 Primary care

EDUCATION AND TRAINING

- 11 Medical education 1
- 12 Medical education 2
- 13 The overseas doctor

SYSTEMS, DISEASES AND SYM PTO M S

- 14 Symptoms and signs
- 15 Blood
- 16 Bones
- 17 Childhood
- 18 The endocrine system
- 19 The eye
- 20 The gastrointestinal system
- 21 Gynaecology
- 22 The heart and circulation 1
- 23 The heart and circulation 2
- 24 Infections
- 25 Mental illness
- 26 The nervous system 1
- 27 The nervous system 2
- 28 Oncology
- 29 Pregnancy and childbirth
- 30 The respiratory system
- 31 The skin 1
- 32 The skin 2
- 33 The urinary system

INVESTIGATIONS

- 34 Basic investigations
- 35 Laboratory tests
- 36 Endoscopy
- 37 X-ray and CT
- 38 MRI and ultrasound
- 39 ECG

<<剑桥医学英语>>

TREATMENT

- 40 Medical treatment
- 41 Surgical treatment
- 42 Therapies

PREVENTION

43 Screening and immunization

EPIDEMIOLOĞY

44 Epidemiology

ETHICS

45 Medical ethics

RESEARCH

TAKING A HISTORY

EXAMINATION

EXPLANATION

PRESENTATIONS

Appendix I

Appendix II

Appendix III

Appendix IV

Appendix V

Appendix VI

Answer key

Index

<<剑桥医学英语>>

章节摘录

Hospital staff The people who work in any type of workplace, including hospitals, are called the staff. The medical staff in a British hospital belong to one of four main groups: A pre-registration house officer (PRHO), or house officer, is a newly graduated doctor if the first year of postgraduate training. After a yeaz; he or she becomes a registered medi practitioner. In the current system of training, the Foundation Programme, the name fol these junior doctors is Foundation Year I doctor (FY1). (See Unit 12) A senior house officer (SHO) is in the second year of postgraduate training. The title is now Foundation Year 2 doctor (FY2), but the old terms senior house officer and SHO are still used. A specialist registrar (SpR) is a doctor who has completed the Foundation Programme, and is training in one of the medical specialties. There are also some non-training registrdoctors who have completed their training but do not wish to specialize yet. A consultant is a fully qualified specialist. There may also be some associate specialistssenior doctors who do not wish to become consultants. In addition, there is at least o medical (or clinical) director, who is responsible for all of the medical staff. Medical teams Consultant physicians and surgeons are responsible for a specific number of patients in the hospital. Each consultant has a team of junior doctors to help care for those patients. In many hospitals, there are multidisciplinary teams which consist not only of doctors but also of physiotherapists and other allied health professionals (see Unit 8). When patients enter - or are admitted to hospital, they are usually seen first by one of the junior doctors on the ward where they will receive treatment and care. The junior doctor clerks them takes their medical history (see Units 47-49) and examines them. Some time later, the registrar also sees the patients, and may order investigations or tests, for example X-rays or an ECG, make a provisional diagnosis, and begin treatment. The consultant usually sees the new admissions - people who have recently been admitted to the ward for the first time on one of the regular ward rounds, when the management of the patients is discussed with the registrar. Consultants also decide when a patient is ready to be discharged (sent home). On the ward round, the consultant is accompanied by the team and a nurse, and they visit all the patients in the consultants care. Shifts Junior doctors now normally work in shifts, which means they normally work for eight hours every day, for example 7 am to 3 pm, and are then free until 7 am the next day. After a week they change to a different shift, for example 3 pm to 11 pm or 11 pm to 7 am. The alternative system is to work from 9 am to 5 pm every day and to take turns to be on call available to return to the hospital if necessary - from 5 pm to 9 am the next day. Days on call are set out in a rota, or list of names and times. Doctors on call carry a radio pager, or bleeper, a device which makes a noise when someone is trying to contact them.

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