

Medical Spanish Elective

Blocks 9 & 10 – Spring 2016

Introduction: This interactive class will use dynamic teaching methods from the Teaching Proficiency through Reading and Storytelling (TPRS) model to teach medical Spanish at a beginner's level. The focus will be on eight common diseases or chief complaints as listed below. Each session will involve a brief case-based didactic portion, group review of the material, dialogue with partners, and brief written assessments to evaluate how well the previous session's course material has been taught.

Evaluation: Students will be evaluated at the end of the course by how well they are able to elicit a history of present illness in Spanish from a standardized patient, who is as yet to be determined but most likely to be an experienced interpreter with formal training in medical Spanish. The attached rubric will be used to evaluate all students. Students who are taking the class for elective credit as an Independent Study Project with Dr. Woleben and whom attend all sessions will receive credit as competency achieved.

Location: All classes will be held in MMEC 8-101 from 3:30-5:00 PM except for the final assessment, which is to be determined.

Expectations:

As adult learners, students are expected to be motivated to participate in classroom activities. They are encouraged to be self-directed learners and study the material outside of the classroom. Students are expected to complete the provided questionnaires and quizzes and to prepare for and attend the end-of-course assessment. Students should notify the instructor of any planned absences in advance.

Schedule: Block 9

Session #1: Introduction & Hypertension Tuesday, January 19	Session #2: Diabetes Wednesday, January 20
Session #3: Respiratory Illnesses Monday, January 25	Session #4: Abdominal/ GI Illnesses Wednesday, January 27
Session #5: Musculoskeletal Complaints Monday, February 1	Session #6: Pregnancy and Gynecologic Visits Wednesday, February 3
Session #7: Full Adult H&P Monday, February 8	Session #8: Pediatric H&P Wednesday, February 10
Session #9: Assessment <i>Tentatively - Friday, February 12</i>	

Schedule: Block 10

Session #1: Introduction & Hypertension Monday, February 15	Session #2: Diabetes Wednesday, February 17
Session #3: Respiratory Illnesses Monday, February 22	Session #4: Abdominal/ GI Illnesses Wednesday, February 24
Session #5: Musculoskeletal Complaints Monday, February 29	Session #6: Pregnancy and Gynecologic Visits Wednesday, March 2
Session #7: Full Adult H&P Monday, March 7	Session #8: Pediatric H&P Wednesday, March 9
Session #9: Assessment <i>Tentatively - Friday, March 11</i>	

Contact Information:
[Removed for privacy]

Resources

- McGraw-Hill's Complete Medical Spanish, Second Edition (Rios & Fernández Torres) - \$7-12 on Amazon, paperback/ Kindle → Third Edition is \$11-17 on Amazon*
- Juckett, Gregory. "Caring for Latino patients." *American family physician* 87.1 (2013): 48-54.*
- Hablamos Juntos: Language Policy and Practice in Healthcare > Resources
 - <http://www.hablamosjuntos.org/resources/default.resources.asp#ec>
- Think Cultural Health: A Physician's Practical Guide to Culturally Competent Care
 - Free e-learning course provided by the U.S. Department of Health & Human Services
 - <https://www.thinkculturalhealth.hhs.gov/>
- Culturally Competent Care for Latino Patients
 - Cases provided by the by the Markkula Center for Applied Ethics at Santa Clara University
 - <http://www.scu.edu/ethics/practicing/focusareas/medical/culturally-competent-care/hispanic-intro.html>
- Latino Culture Clues
 - Provided by the University of Washington Medical Center
 - <http://depts.washington.edu/pfes/PDFs/LatinoCultureClue.pdf>
- Latino/a Health for Health Care Providers
 - Provided by UNC Health Sciences Library
 - <http://guides.lib.unc.edu/latinohealth>
- Culture, Language and Health Literacy
 - Provided by the U.S. Department of Health & Human Services
 - <http://www.hrsa.gov/culturalcompetence/index.html>

Apps

- Canopy Translator
- Polyglot Med Spanish Language Learning App (Duke)

Course Objectives

Session #1: Introduction & Hypertension

By the end of this class, students should:

1. Understand the class format and student/ teacher expectations as listed in the syllabus.
2. Complete the pre-course questionnaire.
3. Know the vocabulary and sentence structure necessary for an HPI.
4. Review the hypertension case & vocabulary with partners and in the small group setting.

Session #2: Diabetes

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous class and understand the answers.
2. Know the vocabulary and sentence structure necessary for discussing diabetes and related concerns.
3. Review the diabetes case & vocabulary with partners and in the small group setting.

Session #3: Respiratory Illnesses

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous classes and understand the answers.
2. Know the vocabulary and sentence structure necessary for discussing respiratory illnesses and related concerns.
3. Review the respiratory case & vocabulary with partners and in the small group setting.

Session #4: Abdominal/ Gastrointestinal Illnesses

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous classes and understand the answers.
2. Know the vocabulary and sentence structure necessary for discussing abdominal/ GI illnesses and related concerns.
3. Review the GI case & vocabulary with partners and in the small group setting.

Session #5: Musculoskeletal Complaints

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous classes and understand the answers.
2. Know the vocabulary and sentence structure necessary for discussing MSK complaints and related concerns.
3. Review the MSK case & vocabulary with partners and in the small group setting.

Session #6: Pregnancy and Gynecologic Visits

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous classes and understand the answers.
2. Know the vocabulary and sentence structure necessary for discussing OB/GYN- related concerns.
3. Review the OB/GYN case & vocabulary with partners and in the small group setting.

Session #7: Full Adult H&P

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous classes and understand the answers.
2. Know the vocabulary and sentence structure necessary for completing a full adult H&P.
3. Review the pertinent vocabulary with partners and in the small group setting.
4. Read the previously provided literature on cultural considerations in caring for the Latino population and be prepared to discuss major principles in the larger group.

Session #8: Pediatric H&P

By the end of this class, students should:

1. Complete the quiz addressing topics from the previous classes and understand the answers.
2. Know the vocabulary and sentence structure necessary for discussing pediatric-specific concerns.
3. Review the pediatric case & vocabulary with partners and in the small group setting.

Session #9: Assessment

By the conclusion of this session, students should:

1. Interview the SP with the chief complaint of respiratory illness or headache.
2. Receive feedback about their oral fluency from SP using the standardized rubric.
3. Complete the post-elective questionnaire.

**Elective Form
VCU SOM**

1. **Title of Elective:** Spanish for Medical Professionals
2. **Department:** Family Medicine
3. **Name of Preceptor (Primary Contact):** Dr. Mark Ryan
4. **Phone of Preceptor:** (804) 721-6473
5. **Email of Preceptor:** mark.ryan@vcuhealth.org
6. **Time Periods Elective is Offered** (Circle all that apply):
1 2 3 4 5 6 7 8 **9** 10 **11** 12
Students enrolled in Spanish-speaking global health electives will be prioritized for enrollment during Period 9, after which any remaining spots will be open to the rest of the fourth-year class for enrollment. Period 11 is open to enrollment by all fourth year medical students.
7. **Maximum Enrollment/Block:** 16
8. **Time/Place to report on first day:** Contact preceptor. MMEC Classrooms during the afternoon is most likely.
9. **Lectures/Seminars:** *Yes/No*
10. **Hours per Week:** Approximately 15 hours/week (including classroom time and completion of 1 unit of Rosetta Stone or similar Spanish software)
11. **Outpatient:** *Yes/No*
12. **Inpatient:** *Yes/No*
13. **Night Call:** *Yes/No*
14. **Weekends:** *Yes/No*
15. **Exam required:** *Yes/No*
16. **Evaluation Method(s):** Oral case-based dialogue with “standardized patient” (certified medical Spanish interpreter), completion of vocabulary quizzes in class, observation of in-class activities
17. **Resources:**
McGraw-Hill’s Complete Medical Spanish, Second Edition (Rios & Fernández Torres)
Juckett, Gregory. “Caring for Latino patients” American family physician 87.1 (2013): 48-54
18. **Description (One paragraph describing the rotation):**

This interactive class will use dynamic teaching methods to teach medical Spanish at an intermediate level. The focus will be on the following eight common disease processes or patient visits: hypertension, diabetes mellitus, respiratory illnesses, abdominal/gastrointestinal illnesses, musculoskeletal complaints, pregnancy and gynecologic visits, and full adult and pediatric history and physicals. Each session will involve brief written assessments to evaluate how well the previous session’s course material has been taught, a case-based dialogue to introduce vocabulary for that day’s session, group review of the material, role playing with partners, and interactive games such as Bingo and Jeopardy. Students interested in taking this class should note that the greatest benefit would likely be to those with some prior background in Spanish.

Please note: Completion of this elective is a pre-requisite for participation in Spanish-language global health electives. [INOVA students are expected to teleconference into sessions.] Concurrent completion of one unit of Rosetta Stone or similar software for Spanish education is required along with this elective. One absence will be allowed, but the attendance at the final evaluation is required.

19. **Goal(s):** By the completion of this elective, students will be able to elicit a history of present illness for a basic medical concern in Spanish and will feel more confident with their ability to speak, read, and understand basic medical Spanish.

20. **Learning Objectives (List at least 3 learning objectives):**

- 1) By the end of the medical Spanish elective, the fourth year medical student will be able to recognize common chief complaints and identify body parts in Spanish, as measured by in-class activities requiring knowledge of Spanish vocabulary.
- 2) By the end of the medical Spanish elective, the fourth year medical student will apply knowledge of introductions and select appropriate questions to elicit a history of present illness in Spanish, as measured by dialogue with standardized patient during the final assessment.
- 3) By the end of the medical Spanish elective, the fourth year medical student will examine recommendations for culturally competent care for Latino patients, demonstrate understanding of diverse cultural beliefs, and exemplify the LEARN model to facilitate a cross-cultural interview as measured by discussion with his/her classmates.

I2CRP Capstone Project: Spanish for Medical Professionals Elective Curriculum - Lesson Plans

Session #1: Introduction & Hypertension

Lesson Outline

1. Address student questions/ concerns about type of instruction, expectations, and evaluation as delineated in syllabus. (5 min)
2. Teach/ review vocabulary and sentence structure necessary for HPI. (35 min)
 - a. Greetings/ introductions:
 - i. What are some greetings that the students can list?
 - ii. Hola, Buenos días, buenas tardes, buenas noches
 - iii. Me llamo ____, ¿cómo te llamas?
 - b. How to elicit the history – Review question words, common chief complaints
 - i. ¿Cómo está? - How are you?
 - ii. ¿Cómo se siente? – How do you feel?
 - iii. ¿Qué molestias tiene? – What complaints do you have?
 1. ¿Qué le duele? ¿Le duele algo?
 - iv. LQQTSMa or similar scheme for HPI
 1. ¿Dónde le duele?
 2. ¿Cómo cuchillos? Aguda? Sordo?
 3. En una escala a uno a diez (y diez es lo peor), ¿cómo le duele?
 4. ¿Cuándo le duele? En la mañana, cuando se despierta, durante la noche... ¿Cuándo está trabajando? Jugando un deporte?...
 5. ¿Hay algo que mejora el dolor? ¿que empeora el dolor?
 6. ¿Otros síntomas?
 - c. Medicines/ Allergies
 - i. ¿Está tomando alguna medicina? alguno medicamento? una vitamina?
 - ii. ¿Cuál es la dosis? ¿Cuántas pastillas por día?
 - iii. ¿Tiene alergias?
3. Read through hypertension case & teach vocabulary in large group. (30 min)
 - a. Case 1 Teaching Points
 - i. Hypertension = la presión alta; vitals (los signos vitales), heart rate (el ritmo cardiaco), temperature (la temperatura), height (la altura), weight (el peso)
 1. to measure = medir
 2. Review sx of HTN in Spanish: HA, blurred vision, CP, n/v
 - ii. Headaches = dolor de cabeza; “me duele la cabeza” construction
 1. ¿Cuál es la presión?
 2. ¿Tiene usted la presión alta?
 - iii. Frequencies = ¿con qué frecuencia?
 1. siempre, a menudo, a veces, cada día, diario/diaria, cada semana, cada mes...
 - iv. Numbers = cero a veinte, construction for other numbers
 - v. Co-morbidities/ organ involvement = heart attack (el infarto), stroke (derrame), heart disease, aortic dissection, arteries (las arterias), veins (las venas), heart failure (insuficiencia cardiaca), swollen legs (piernas hinchadas), etc.
 - vi. Prevention = exercise (hacer ejercicio), low-salt diet (dieta baja en sal)
 - vii. Medication = toma esta medicina __ veces al día, cada mañana, cada noche...
 1. Delivery: pastillas, jarabe, inhalador, cucharas...
 2. frecuencia
 - viii. Side effects of medicine = efectos secundarios
 1. Increased urination (más micción), low blood pressure, dizziness, changes in lab values, increased heart rate, rash, stomachache, nausea/ vomiting, headaches, insomnia (insomnio), sedation (la sedación), cramps, joint pain
4. Role-play hypertension case & review vocabulary in pairs. (20 min)

Session #2: Diabetes

Lesson Outline

1. Review vocabulary and sentence structure from previous class. (5 min)
2. Hypertension vocabulary/ sentence structure quiz. (10 min)
3. Review of quiz answers. (5 min)
4. Read through diabetes case & teach vocabulary in large group. (40 min)
 - a. Case 2 Teaching Points
 - i. Symptoms of diabetes = polyuria, polydipsia, polyphagia
 1. Orinar más, tiene más sed que usual, comer más
 - ii. UTI symptoms = burning, itching, fever, low back pain
 1. Ardor, me pica____, la fiebre, dolor de espalda, picazón
 - iii. Co-morbidities/ organ involvement = blurred vision (la vista borrosa), n/v, chest pain, heart attack, stroke, nerve damage (daño a los nervios), kidney damage (hacer daño a los riñones), skin ulcers (las úlceras de piel), etc.
 - iv. Unique aspects of diabetic care = foot exam, ophthalmologic exam
 1. Necesito mirar en los ojos.
 2. Por favor, saque los calcetines para que puedo examinar los pies.
 - v. Injections (la inyección)
 1. When was the last time you checked your blood sugar?
 - a. ¿Cuándo fue la última vez que chequeó su azúcar?
 2. Finger prick (determinación de la glucemia capilar)
 3. Test = prueba
 - vi. Diet/ Exercise
 1. Low/ high carbohydrates, fat, protein
 2. Constructions = try to eat (comer) vs. try to avoid (evitar)
 3. Weight counseling = How much do you weigh? / You weigh ____.
 - a. Have you gained/ lost weight recently? ¿Ha aumentado peso? ¿Ha bajado en peso?
 - b. Obesity and risk of other co-morbidities (La obesidad)
 - vii. Family history
 1. Family history of diabetes?
 2. Family history of heart disease, etc?
 - viii. Social history of diet/ exercise
5. Role-play diabetes case & review vocabulary in pairs. (30 min)

Session #3: Respiratory Illnesses

Lesson Outline

1. Review diabetes vocab/ sentence structure. (5 min)
 - a. Does it hurt? Does something hurt?
 - b. When was the last time you checked your blood sugar?
 - c. Do you have high blood pressure? What's your diet like?
 - d. Feet, eyes (blurry vision), nerve damage, skin, skin ulcers, kidneys
 - e. Cloudy vision, dizziness, swollen legs
 - f. Injection, infection
 - g. Heart attack, stroke
2. Diabetes vocabulary/ sentence structure quiz. (10 min)
3. Review of quiz answers. (5 min)
4. Read through respiratory case & teach vocabulary in large group. (40 min)
 - a. Case 3 Teaching Points
 - i. How many flights of stairs/ how much activity can she tolerate? (Stairs = las escaleras, activity = la actividad)
 - ii. How long has she felt sick? ¿Por cuánto tiempo ha sentido enferma?
 - iii. Cough? Phlegm/ mucus? What color? Pain? Sick contacts? Recent travel? Night sweats? Chills? Fevers? Sore throat? Congestion/ runny nose? Ear pain?
 1. ¿Le duelen las orejas? ¿Otras personas que están enfermas?
 - iv. History of heart disease? Valve problems?
 1. Past surgeries
 - v. History of asthma? - ¿Tiene asma?
 1. Inhaler use - ¿Usa un inhalador? ¿Usa una bomba? ¿Cuántas veces al día?
 2. Ear infections? Allergies? Eczema?
 - vi. Health maintenance
 1. Up to date on vaccines? – ¿Tiene todas las vacunas?
 - vii. Family history
 1. History of heart or lung disease? - ¿Hay personas en la familia que tiene problemas del corazón o de los pulmones?
 - viii. Social history
 1. Smoker? - ¿Fuma Ud?
 2. Works in jail? - ¿Trabaja Ud en una cárcel?
 - ix. PE instructions: Breathe deeply, sit up, hold your breath, I'm going to listen to your heart...
 - x. Assessment/ Plan
 1. I think you have ____
 2. We are going to try ____
 3. Can you take this medicine BID? Have you ever had an allergy to antibiotics? ¿Ha probado algún antibiótico? ¿Tiene alergias a alguna medicina?
 4. What pharmacy do you use? = ¿Qué farmacia usa?
 5. We need to get a chest X-ray – la radiografía del pecho
 6. We need to get tests to check your lung function
5. Role-play respiratory case in pairs and review vocabulary. (10 min)
6. Label body parts in Spanish using worksheet and vocab list. (20 min)

Session #4: Abdominal/ Gastrointestinal Illnesses

Lesson Outline

1. Respiratory vocabulary/ sentence structure quiz. (10 min)
2. Review of quiz answers. (5 min)
3. Teach GI vocabulary in pairs. (15 min)
4. Interpret GI case in large group. (35 min)
 - a. Case 4 Teaching Points
 - i. Review frequencies (constant, intermittent, at times...)
 - ii. GI symptoms: constipation, diarrhea, changes in diet, weight loss/ weight gain, nausea/ vomiting, problems swallowing (tragar = to swallow), decreased/ increased hunger
 1. Pain radiating to shoulder, pain radiating to back
 - a. ¿Dónde le duele?
 - b. ¿Mueve el dolor hasta el hombro? La espalda?
 2. Blood in vomit? Blood in stool? What color?
 - a. ¿Hay sangre en el vomito? ¿Hay sangre en el excremento?
 3. Belly pain in a female
 - a. Ovarian causes? Menstrual causes?
 - iii. Abdominal organs: mouth, tongue, esophagus, stomach, small intestine, large intestine, rectum, anus, liver, spleen, gall bladder, etc...
 - iv. GU organs: los riñones, la vejiga, el pene, los testículos (Female GU organs to be reviewed in 2 classes)
 - v. Medications that may cause GI symptoms?
 - vi. Review diet - ¿Cuál es su dieta? ¿Qué come?
 - vii. Imaging
 1. X-ray
 2. CT
 3. Ultrasound
 4. MRI
 - viii. Describing pain
 1. Dull
 2. Sharp
 3. Crampy
 4. En una escala de uno a diez ____
 - ix. Medical history
 1. Past surgeries? ¿Le opera algo? ¿Le opera Ud.?
 2. History of colonoscopies? ¿Cuándo fue la ultima vez que tuvo una colonoscopia? (Cuando fue la ultima vez – construction)
 3. Family history of colon cancer? Other cancers?
 - a. ¿Está preocupada por una razon?
 - b. Tenía cancer del hígado.
5. Play body part bingo. (25 min)
 - a. Use pre-made worksheets (randomized online) and cheerios or similar as chips
 - b. If students unsure if Spanish body part is found on their bingo sheet, can ask peers first
→ then ask teacher
 - c. Students can trade worksheets after 1 round

Session #5: Musculoskeletal Complaints

Lesson Outline

1. GI vocabulary/ sentence structure quiz. (10 min)
2. Review of quiz answers. (5 min)
3. Interpret MSK case & teach vocabulary in large group. (30 min)
 - a. Case 5 Teaching Points
 - i. Onset? Triggered by something? Work? Sports? Walking? Running? Lifting? Driving?
 1. ¿Cuáles son las actividades que empeoran el dolor?
 2. Torcerme → Me torcí la rodilla (always past tense)
 3. Doblar = to turn, to bend
 4. La escayola = cast
 5. Asegurarme = to ensure, make sure
 - ii. Review pertinent body parts – MSK system (“el esqueleto”)
 - iii. Pain vs. inflammation
 1. Describe the pain, “Dígame dónde le duele”
 2. Taking any medication to improve the pain?
 - iv. Treatments
 1. RICE/ Anti-inflammatories
 - a. Ibuprofeno
 - b. Hielo = ice
 - c. Descanse = rest (command)/ descansar = to rest
 2. Imaging: Necesita radiografía.
 - a. Una resonancia magnética
 3. Surgery: Tengo que consultar con un cirujano. Sugiero que consulte un cirujano.
 4. Physical therapy
 - a. La terapia física
 5. Cast/ splint
 - a. Escayola = sling, cast, plaster
 - b. Rodillera, tobillera, cordillera = braces
4. Role-play MSK case & review vocabulary in pairs. (15 min)
5. Jeopardy, Round 1 (30 min)
 - a. Split up into 3 teams, allow students to name teams in Spanish
 - b. Flip coin or similar to see which team goes first, and take turns
 - c. Allow answers that are close to correct answer
 - d. Allow other teams to answer if first team gets answer wrong
 - e. Keep score on board, keep track for next class (Double Jeopardy & Final Jeopardy)

Session #6: Pregnancy and Gynecologic Visits

Lesson Outline

1. Discuss final evaluation session, next Wed @ 6 pm. (5 min)
 - a. 10 min encounters, headache or URI = chief complaint
 - b. No physical exam necessary
 - c. Brief feedback from SP
2. MSK vocabulary/ sentence structure quiz. (10 min)
3. Review of quiz answers. (5 min)
4. Interpret gynecologic case & teach vocabulary in large group. (30 min)
 - a. Review OB/GYN vocabulary from cheat sheet.
 - i. Preterm = prematuro/a; antes del término
 - ii. ICU = unidad de cuidados intensivos (UCI)
 - b. Case 6 Teaching Points
 - i. La sangre = blood, Sangrar = to bleed
 - ii. Empezar = to begin, ¿Cuándo empezó? = When did it begin?
 - iii. Pesado/a, ligero/ a
 - iv. Mostrar = to show, la muestra = sample
 1. En ayunas = fasting
 - v. Coágulos = clots
 - vi. Siempre, nunca, “un día sí, un día no”
 - vii. Temprano/ tarde
 - viii. Questions
 1. Are you pregnant? – ¿Está embarazada?
 2. Have you ever been pregnant? - ¿Ha estado embarazada (en el pasado)?
 3. Have you ever had a miscarriage? - ¿Ha tenido un aborto natural?
 4. Have you ever had an abortion? - ¿Ha abortado un embarazo? ¿Ha tenido un aborto?
 5. How many children do you have? - ¿Cuántos hijos tiene (Usted)?
 6. What do you know about family planning/ methods of contraception? - ¿Qué sabe de los metodos anticonceptivos/ de planificacion?
 7. What method of contraception do you use? - ¿Qué método/ qué tipo de anticonceptivo usa?
 8. Are you sexually active? - ¿Tiene sexo Ud.? – review slang words inappropriate for physician but which may be used by patients
 - ix. Doctors' suggestions: Sugiero = I suggest, Mi sugerencia (la sugerencia, la recomendación); Recomiendo = I recommend, I suggest; Prefiero = I prefer
5. Role-play gynecologic case & review vocabulary in pairs. (15 min)
6. Double Jeopardy (same teams as previous class) (25 min)
 - a. Instructions: Guess what all the categories mean.
 - i. Category 1: Haga lo que hago – Translate English to Spanish
 - ii. Category 2: Coma lo que como – Spanish to English, involving foods
 - iii. Category 3: Toma lo que tomo - Medication instructions from Sp to Eng
 - iv. Category 4: Mueva como yo muevo – Translate instructions from Sp to Eng
 - v. Category 5: Sienta lo que siento – Translate moods from Sp to Eng
 - vi. Final jeopardy: translate instructions English to Spanish

Session #7: Full Adult H&P

Lesson Outline

1. Gynecologic vocabulary/ sentence structure quiz. (10 min)
2. Review of quiz answers. (5 min)
3. Review structure of interview and interview vocabulary in large group. (30 min)
 - a. Students should interpret case in large group
 - i. Focus on physical exam instructions.
 - ii. Highlight any new vocab in bold.
4. Role-play full adult H&P in pairs. (20 min)
5. Review literature and discuss cultural competencies in working with Latino/ Spanish-speaking patients. (25 min)
 - a. Botánica/ farmacia and asking about herbal supplements and/or alternative therapies
 - i. Alternative therapies that may be used in the diverse Latino communities
 - ii. Ask about any alternative therapies that students may have heard about
 - b. Recognize barriers to care that affect the Latino community
 - i. Ask students to identify possible barriers to care
 - c. LEARN method and other models of cross-cultural communication
 - i. Reflect upon ways to use LEARN and other models (e.g., Kleinman questions) in patient interviews

Session #8: Pediatric H&P

Lesson Outline

1. Adult H&P vocabulary/ sentence structure quiz. (10 min)
2. Review of quiz answers. (5 min)
3. Examine differences in interview and pediatric vocabulary in large group; interpret pediatric H&P in large group setting. (35 min)
 - a. Case 8 Teaching Points
 - i. Addressing questions to parents: ¿Cómo está su hijo/hija?, por ejemplo
 - ii. Asking parents to leave room when talking to teenagers
 1. “Tengo que hablar a su hijo/hija. Es algo que hago con todos mis pacientes. Por favor, ¿puede salir afuera del cuarto?”
 - iii. Questions of development – What are things you would want to ask in terms of development?
 1. ¿Cuántos meses/años tiene (él/ella)?
 2. ¿Puede ____? (sonreír, gatear, levantar, caminar, caminar por guardando en la sofa...)
 3. ¿En qué curso (grado) está? Va a la escuela? Primaria, secundaria, el colegio, la Universidad? ¿Qué está estudiando? ¿Qué quiere hacer cuándo es adulto?
4. Role-play pediatric case in pairs. (25 min)
5. Pediatric vocabulary/ sentence structure quiz. (10 min)
6. Review of quiz answers. (5 min)

M4 Medical Spanish Elective: Final Assessment

Date(s): Wednesday, February 10 (Block 9) and Wednesday, March 9 (Block 10)

Times: 6:00 PM – 8:30 PM

Location: MMEC 8-101

Scenario:

Students will act as the doctor of an adult standardized patient (played by Bryan Castro, VCUHS Medical Spanish interpreter) about one of two chief complaints (cough or headache). Students will be required to elicit a full History of Present Illness (HPI) with elements listed below, as well as to ask to perform a physical exam, although no aspects of the physical exam should be performed. Students will also be expected to provide a brief assessment and plan, as detailed below. Ten minutes will be allotted for the encounter, with the remainder of the 15-minute time slot for feedback from the standardized patient.

Expected Elements of Encounter:

☐ Greeting & Goodbye

(no required order)

☐ Location or chief complaint (CC)

☐ Quality of CC

☐ Quantity or severity

☐ Timing, including onset and duration

☐ Setting

☐ Modifying Factors, including things that make CC better or worse

☐ Associated Symptoms, including brief pertinent Review of Systems

☐ Medications

☐ Allergies

☐ Tobacco use

☐ Alcohol use

☐ Drug use

☐ Employment status

☐ Vaccine/ health maintenance status

☐ History of similar illness in family members

☐ Ask to perform physical exam

☐ Assessment: e.g., "I think you have ____."

☐ Plan: e.g., "I would like to ____." Options include doing parts of physical exam, getting labs or imaging, referring to another doctor, etc.

Evaluation:

Students will be evaluated based on their abilities as assessed by Bryan Castro according to the M4 Medical Spanish HPI Rubric. Students will be given specific feedback (based on components of the rubric) to use as a basis for further study in medical Spanish.

Name

Date

Pre-Elective Survey

1) Have you ever taken a Spanish class before? *(Please circle one)*

Yes

No → skip to question 2

a. If so, when and for how long? *(e.g., middle school from 2000-2003, 3 years)*

b. What is the highest level of Spanish education you have completed? *(e.g., 8th grade Spanish vs. Spanish major)*

2) Please list and describe any and all experiences (vacations, immersion courses, medical mission trips, etc.) you have had in Spanish-speaking countries. *(e.g., Argentina, study abroad, 1 semester, spoke Spanish > English; mission trip to Honduras x10 days, used interpreter)*

3) Have you had any previous formal medical Spanish training? If so, when and for how long?

4) Have you already taken, or will you be taking the M4 Rosetta Stone elective for Spanish this year? *(Please circle one)*

Yes

No → skip to question 5

a. If you already have taken the Rosetta Stone elective, when did you take it and approximately how many hours did you spend using the software?

5) Please describe yourself based on the statements below using the provided rating scale.

	None	Poor	Fair	Good	Excellent
Knowledge of Spanish vocabulary					
Knowledge of medical Spanish terminology					
Ability to understand written Spanish					
Ability to understand spoken Spanish by a native speaker					
Ability to understand written medical Spanish terms					
Ability to understand spoken medical Spanish terms by a native speaker					
Ability to speak Spanish and be understood by a native speaker					
Ability to speak Spanish in a medical setting and be understood by a native speaker					

6) Have you interacted with native Spanish speakers with limited English proficiency in clinical settings during your time in medical school? *(Please circle one)*

Yes

No → skip to question 6b

a. If so, in what environment? *(Please check all that apply)*

☐ VCU Health Systems – VCU Medical Center

☐ Foundations of Clinical Medicine Preceptorship *(Please describe the location of your preceptorship)*

☐ Volunteer clinics (e.g., Crossover, Fan Free Clinic, Una Vida Sana)

☐ Other location, e.g. site for family medicine or other clinical rotation *(Please describe)*

b. Have you ever used any method of Spanish interpretation in the medical environment? *(Please circle one)*

Yes

No → skip to question 7

i) If so, please describe your use of Spanish interpretation in clinical encounters using the statements below.

To communicate with my Spanish-speaking patients, I have...		
...used the blue phone to call an interpreter.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
...used MARTTI (My Accessible Real-Time Trusted Interpreter).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
...used a certified medical interpreter.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
...used family members or friends of my patient(s) as an interpreter.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
...used other members of the medical team as (an) interpreter(s).	<input type="checkbox"/> Yes	<input type="checkbox"/> No

ii) Please rate each of the above methods on your perception of their reliability.

Rank each method using the numbers 1-5, where 1 is the most reliable and 5 is the least reliable.	1	2	3	4	5
Blue phone interpretation					
MARTTI					
Certified medical interpreter					
Family members or friends of the patient as interpreters					
Medical team members as interpreters					

iii) Please rate each of the above methods on your perception of their ease.

Rank each method using the numbers 1-5, where 1 is the easiest to use and 5 is the most difficult to use.	1	2	3	4	5
Blue phone interpretation					
MARTTI					
Certified medical interpreter					
Family members or friends of the patient as interpreters					
Medical team members as interpreters					

7) Please describe your ability to use Spanish in clinical encounters using the statements below.

Use a 1-5 scale as follows: 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree	1	2	3	4	5
I can introduce myself to patients in Spanish.					
I can accurately obtain an HPI and elicit symptoms in Spanish for complaints of/ patients with: <i>(Please answer for all topics)</i>					
- Hypertension					
- Upper respiratory infections					
- Abdominal pain					
- Joint pain					
- Pregnancy					
- Headaches					
- Assessing growth and development (pediatric well-child exam)					
I can ask about medications and allergies in Spanish.					
I can obtain a past medical, family, and/or social history in Spanish. <i>(Please circle all which apply)</i>					
I can instruct my patient through all necessary portions of the physical exam in Spanish.					
I can discuss the plan with my patient in Spanish.					
I can understand patients' questions in Spanish.					
I can address patients' concerns in Spanish.					

8) Please describe your confidence level assuming a Spanish-speaking patient.

Use a 1-5 scale as follows: 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree	1	2	3	4	5
I feel confident introducing myself to a patient.					
I feel confident taking a full HPI from a patient.					
I feel confident performing a physical exam on a patient.					
I feel confident providing medication instructions to a patient.					
I feel confident providing discharge information and/or follow-up information to a patient.					
I feel confident understanding and addressing patients' concerns.					

9) Please briefly describe your reason for interest in learning medical Spanish and/or taking this course (*in 1-2 sentences*).

10) Do you have any personal goals for this class? (e.g., *"by the end of this class, I will be able to obtain a social history from my patients in Spanish"*)

Name

Date

Post-Elective Survey

1) Please describe your perceptions of yourself based on statements below using the provided rating scale.

	None	Poor	Fair	Good	Excellent
Knowledge of Spanish vocabulary					
Knowledge of medical Spanish terminology					
Ability to understand written Spanish					
Ability to understand spoken Spanish by a native speaker					
Ability to understand written medical Spanish terms					
Ability to understand spoken medical Spanish terms by a native speaker					
Ability to speak Spanish and be understood by a native speaker					
Ability to speak Spanish in a medical setting and be understood by a native speaker					

2) Please describe your ability to use Spanish in clinical encounters using the statements below.

Use a 1-5 scale as follows: 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree	1	2	3	4	5
I can introduce myself to patients in Spanish.					
I can accurately obtain an HPI and elicit symptoms in Spanish for complaints of/ patients with: <i>(Please answer for all topics)</i>					
- Hypertension					
- Upper respiratory infections					
- Abdominal pain					
- Joint pain					
- Pregnancy					
- Headaches					
- Assessing growth and development (pediatric well-child exam)					
I can ask about medications and allergies in Spanish.					
I can obtain a past medical, family, and/or social history in Spanish. <i>(Please circle all which apply)</i>					
I can instruct my patient through all necessary portions of the physical exam in Spanish.					
I can discuss the plan with my patient in Spanish.					
I can understand patients' questions in Spanish.					
I can address patients' concerns in Spanish.					

3) Please describe your confidence level assuming a Spanish-speaking patient.

Use a 1-5 scale as follows: 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree	1	2	3	4	5
I feel confident introducing myself to a patient.					
I feel confident taking a full HPI from a patient.					
I feel confident performing a physical exam on a patient.					
I feel confident providing medication instructions to a patient.					
I feel confident providing discharge information and/or follow-up information to a patient.					
I feel confident understanding and addressing patients' concerns.					

4) Do you think this class was helpful in improving your medical Spanish ability?

Use a 1-5 scale as follows: 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree	1	2	3	4	5
This class was helpful in improving my medical Spanish ability.					
This class provided an overview of medical topics I will face in my career.					
This class was in a format that allowed me to learn in different ways.					
This class required too much study outside the classroom.					
I feel prepared for communicating with Spanish speaking patients.					
I think my conversational medical Spanish has improved since I started this class.					
This class helped me to develop cultural competency in interacting with Spanish-speaking patients and patients of Latino heritage.					

5) What was the most helpful part of this class? Were there any features of the course you liked or found particularly helpful in improving your knowledge of medical Spanish?

6) Which was the least helpful part of this class?

7) Please provide any additional feedback that may help us improve the course.

8) If you took the Rosetta Stone elective already this year, how does it compare to this class in terms of focus on medical Spanish terminology? *(Please describe in 1-2 sentences)*

9) Do you think this class should be offered as part of the M4 elective curriculum? Why or why not?

Caso #3: Una infección respiratoria – Una mujer de 62 años que falta de aire con actividades x2 semanas

SAMPLE CASE - NON-OSCE

Hola, Sra. Gutierrez. Me llamo Dr(a). _____. ¿Cómo está hoy?	Hi, Mrs. Gutierrez. My name is Dr. _____. How are you today?
Ay, la verdad es que no me siento muy bien.	Ah, the truth is I'm not feeling very well.
¿Qué molestias tiene? / ¿Cómo se siente?	What's bothering you? / How do you feel?
Bueno, por dos semanas, he estado respirando muy fuerte . Falto de aire cuando estoy caminando.	Well, for two weeks, I've been breathing very hard (strong). I'm short of breath (I lack air) when I'm walking.
Lo siento. ¿Con qué tipo de actividades: por ejemplo, caminando, corriendo, subiendo las escaleras?	I'm sorry. With what type of activities: for example, walking, running, climbing stairs?
No corro mucho, pero cuando subo escaleras, tengo que parar en el medio para tomar respiros , y también cuando camino.	I don't run much, but when I climb stairs, I have to stop in the middle to take breaths , and also when I walk.
¿Todos los días para dos semanas?	Every day for two weeks?
Más o menos.	More or less.
¿Tiene tos ?	Are you coughing? (Do you have a cough ?)
Sí, pero la empezó hace unos días y sigo tosiendo.	Yes, but it began a few days ago and I keep coughing.
Y ¿le duele el pecho ?	And does your chest hurt?
Sí, solamente cuando toso.	Yes, only when I cough.
¿Puede describir el dolor? ¿Es agudo o más sordo ?	Can you describe the pain? Is it sharp or more dull ?
Es sordo.	It's dull.
¿Hay flema/moco cuando tose? ¿Qué color es?	Is there phlegm/ mucus when you cough? What color is it?
Sí, es verde.	Yes, it's green.
¿Hay sangre en la flema?	Is there blood in your phlegm?
No, no he visto sangre.	No, I haven't seen blood.
¿Hay alguien en su casa o en su trabajo que está enfermo?	Is there someone in your house or at your work that is sick?
Sí, mi nieta tiene la gripe y mi hijo tiene un resfriado .	Yes, my granddaughter has the flu and my son has a cold .
Ay, ¡qué lastima! Vale. ¿Tiene otros síntomas?	Oh, that's too bad! Okay. Do you have other symptoms?
¿Tiene fiebre ? ¿Le pica la garganta ? ¿Tiene náusea? ¿ Suda durante la noche? ¿Tiene escalofríos ? ¿El moqueo nasal? ¿ La nariz tapada ? ¿Le pican los ojos?	Do you have a fever ? Does your throat itch (sore throat)? Are you nauseated? Do you sweat during the night? Do you have chills ? Runny nose ? Stuffy nose ? Itchy eyes?
Sí, tenía fiebre la semana pasada, pero no tengo termómetro.	Yes, I had a fever last week, but I don't have a thermometer.
¿Ha tratado algunas medicinas?	Have you tried any medicines?
Sí, bajó la fiebre cuando tomé ibuprofeno.	Yes, the fever lowered when I took ibuprofen.
¿Tiene alergias a algunas medicinas? Al ambiente?	Do you have allergies to any medicines? To the environment?
No, no tengo ninguna alergia.	No, I don't have any allergy.
¿Tiene una historia de problemas del corazón ?	Do you have a history of heart problems?
Sí, me operó para poner otra válvula, creo hace....3 años.	Yes, they operated on me to put in another valve... I think 3 years ago.
Ah, ¿Por qué?	Why?
Eh, no sé... estaba rota .	I don't know...it was broken .
Vale. Y, ¿tiene el asma ?	Ok. And, do you have asthma ?
No, no tengo asma.	No, I don't have asthma.
¿Tiene todas las vacunas ?	Do you have all your vaccines ?

Caso #3: Una infección respiratoria – Una mujer de 62 años que falta de aire con actividades x2 semanas

Creo que sí. ¿Puede chequear el registro?	I think so. Can you check the record?
Claro. ¿Hay alguien en su familia con enfermedades del corazón o de los pulmones ?	Yes, certainly (of course). Is there someone in your family with heart or lung illnesses?
Tengo la cosa de la válvula, y mi mama tenía la misma. Mi papa murió del infarto .	I have the valve thing, and my mom had the same. My dad died of a heart attack .
Ay, lo siento. ¿ A qué edad ?	Oh, I'm sorry. At what age ?
Tenía 84 años.	He was 84 years old.
Vale. Y, mi última pregunta, ¿ fuma Ud.?	Okay. And, my last question, do you smoke ?
No, dejé de fumar hace veinte años.	No, I stopped smoking 20 years ago.
Muy bien, eso es importante para el salud. ¿ Puedo examinarle ?	Very good, that's important for your health. Can I examine you ?
Sí, por supuesto.	Yes, of course.
Voy a escuchar a los pulmones. Respire profundamente/ hondamente. ¿Puede contener su aliento/ respiración? (Contenga su aliento)	I'm going to listen to your lungs. Breathe deeply. Can you hold your breath? (Hold your breath)
Gracias. Siéntese arriba, por favor. Me preocupa que tiene una neumonía o quizás la gripe . Haremos una prueba para la influenza, y también querría hacer una radiografía del pecho .	Thank you. Please sit up. I'm worried that you have a pneumonia or perhaps the flu . We will do a flu test, and also I would like to do a chest X-ray.
¿Hay una medicina que puedo tomar?	Is there a medicine that I can take?
Por el momento, no, porque quiero verificar las imágenes y los resultados de la prueba. Si parece que tiene neumonía bacteriano, puedo recetarle un antibiótico. ¿Ha probado algún antibiótico para la neumonía en el pasado?	At the momento, no, because I want to check the images and the test results. If it seems like you have a bacterial pneumonia, I can prescribe you an antibiotic. Have you tried an antibiotic for pneumonia in the past?
No. ¿Hay algo más que debo hacer?	No. Is there something more that I should do?
Es importante que evite las personas enfermas o jóvenes, como su nieta . Y le voy a llamar con los resultados de la prueba y la radiografía. ¿ Qué farmacia usa ?	It's important to avoid sick people or Young people, like your granddaughter . And I am going to call you with the results of your test and X-ray. What pharmacy do you use ?
Uso el CVS en la calle Main y 25th	I use the CVS on 25th and Main St.
Bueno, si necesita el antibiótico, enviaré la receta allá. Hasta luego.	Well, if you need the antibiotic, I will send the prescription there. Until then.
Chau, Doctor. Gracias.	Bye, Doctor. Thank you.

Caso #7: Un hombre de 56 años que tiene un dolor de cabeza, la primera cita a su oficina

SAMPLE CASE – NON-OSCE

Buenos días, Sr. Álvarez. Me llamo Dr(a). ¿Cómo se siente?	Good morning, Mr. Alvarez. My name is Dr. How do you feel?
Me duele la cabeza mucho.	My head hurts a lot.
¿Cuándo empezó?	When did it begin?
Esta mañana, a sí misma . Tres horas después de acostarme. Estaba como un despertador.	This morning, itself. Three hours after lying down. It was like an alarm clock.
Qué lastima. ¿Dónde le duele?	What a shame. Where does it hurt?
Aquí, a la parte atrás del ojo izquierdo.	Here, the part behind my left eye.
¿Es un dolor agudo? ¿Sordo?	Is it a Sharp pain? Dull?
Ay, es bastante agudo.	Ay, it's quite Sharp.
En una escala de uno a diez, con diez a lo más peor, ¿cuál es la severidad del dolor?	On a scale of 1-2, with 10 as the worst, what is the severity of the pain?
Un ocho.	An 8.
¿De verdad?	Really?
Sí, doctor. Es un dolor muy fuerte. Es ardiente . Estaba llorando del ojo.	Yes, doctor. It's a very strong pain. It's burning. I was crying from my eye.
¿Ha ocurrido en el pasado?	Has it happened in the past?
Una vez, cuando tenía 27 años por unos meses, pero no recuerdo lo que hice. A veces me duele la cabeza aquí, en las sienes , cuando no tomo bastante agua. Pero generalmente no me duele allí.	Once, when I was 27 years old for a few months, but I don't remember what I did. Sometimes my head hurts here, on the temples, when I don't drink enough water. But generally I don't hurt there.
Vale. ¿Ha tomado alguna medicina para mejorar el dolor?	Ok. Have you taken any medicine to improve the pain?
Una aspirina, pero no me ayudó. Tomé lo que tomo cada día.	One aspirin, but it didn't help me. I took what I take every day.
Esta es la aspirina para los bebés, que se llama "baby aspirin." La dosis está demasiada baja para los dolores de su edad.	This is the aspirin for babies, called "baby aspirin." The dose is too low for the pains of your age.
Ay, no sabía.	Oh, I didn't know.
¿Hay algo que empeora el dolor?	Is there something that worsens the pain?
Sí, es peor cuando trato de acostarme. Siento como necesito caminar. También tengo un poco de náusea.	Yes, it is worse when I try to lie down. I feel like I need to walk. I also have a Little nausea.
¿Le molestan los sonidos ruidosos? ¿O las luces?	Do loud noises bother you? Or lights?
No, no.	No, no.
¿Por cuánto tiempo dura el dolor?	How long does the pain last?
Es extraño dura casi 30 minutos, mejora el dolor, y regresa el dolor de nuevo.	It's strange... it lasts almost 30 mins, gets better, and returns again.
Ah. ¿Está tomando algunas otras medicinas?	Ah. Are you taking any other medicines?
Tomo el diurético para la presión alta, el paracetamol para el dolor de la espalda, y la aspirina diariamente .	I take a diuretic for high BP, Tylenol for back pain, and aspirin daily.
¿Tiene algunas reacciones alérgicas?	Do you have any allergies?
Solo la de drogas de sulfa. Salgo en ronchitas .	Only that for sulfa drugs. I break out in welts.
Vale. Y ¿otros problemas médicos ?	Ok, and other medical problems?
La presión, pero es bien controlada con la medicina. El dolor de espalda, pero es un problema viejo .	High BP, but it's well controlled with medicine. The back pain, but it's an old problem.
¿Tiene todas las vacunas? ¿Recibió Ud. la vacuna contra la gripe este año?	Do you have all your vaccines? Did you receive the vaccine against the flu this year?

Caso #7: Un hombre de 56 años que tiene un dolor de cabeza, la primera cita a su oficina

Sí, creo que sí. En el octubre.	Yes, I think so. In October.
¿Se ha operado a usted?	Have you had any surgeries?
Sí, se me sacó la vesícula tres años atrás .	Yes, they took out my gall bladder 3 yrs ago.
Bueno. Y parece que ya tenía la colonoscopia cuando cumplió los cincuenta. ¿Hay alguien en su familia que tiene dolores de cabeza, o problemas neurológicos?	Good. And it seems like you already had your colonoscopy when you turned 50 yrs old. Is there someone in your family who has headaches, or neurologic problems?
Mi hermano tiene ataques epilépticos . Pienso que mi papá murió de un derrame. Y mi mamá tenía migrañas . Murió de una enfermedad de los riñones.	My brother has epilepsy. I think my dad died of a stroke. And my mom had migraines. She died of kidney disease.
Lo siento. ¿A qué edad?	I'm sorry. At what age?
Mi papá murió cuándo tenía 84 años y mi mamá cuándo tenía 76.	My dad died when he turned 84 and my mom when she was 76.
Tengo algunos otros preguntas de su vida privada. ¿Y usted vive con su familia?	I have some other questions about your private life. And you live with your family?
Sí, cerca del hospital.	Yes, near the hospital.
¿Quién vive con usted?	Who lives with you?
Mi mujer, mi hija menor , y mi hermano. Él puede hacer la mayoría de su trabajo sin ayuda, pero le ayudamos con la comida y cosas así .	My wife, my younger daughter, and my brother. He can do the majority of his work without help, but we help him with food and things like that.
Ah y ¿cuántos años tiene él? ¿Y sus hijos?	Ah, and how old is he? And your kids?
Mi hermano tiene 54, mi hija mayor tiene 28 y mi hija menor tiene 20. Asiste la universidad cerquita del aquí.	My brother is 54, my older daughter is 28, and my younger daughter is 20. She attends the university near here.
¿Están saludables?	Are they healthy?
Sí. Las dos corren mucho y hacen yoga. Me piden andar corriendo con ellas pero es difícil . Mi esposa y yo nos gusta caminar juntos.	Yes, the both of them run a lot and do yoga. They ask me to go running with them but it's difficult. My wife and I like to walk together.
Muy bien. Y ¿qué trabajo hace Ud.?	Very good. And what work do you do?
Todavía trabajo en el hospital como el mantenimiento.	I still work in the hospital as a maintenance worker.
¿Fuma Ud.? ¿Bebe alcohol? ¿Toma drogas (no recetadas)?	Do you smoke? Do you drink alcohol? Do you take drugs (not prescribed)?
No fumo. Bebo dos o tres cervezas cuando veo los partidos de fútbol. Y no tomo drogas.	I don't smoke. I drink 2-3 beers when I see soccer games. And I don't take drugs.
Vale. Muy bien. Parece que está en buena salud. ¿Puedo examinarle?	Ok. Very good. It seems like you are in good health. Can I examine you?
Por supuesto.	Of course.
¿Cuál es la línea más pequeña que puede leer con el ojo izquierdo cerrado?	What is the smallest line that you can read with your left eye closed?
EI "P T D S F."	The "P T D S F."
Y con el ojo derecho cerrado, léala hacia atrás . Perfecto. Mire al punto atrás y después a la nariz. Y siga el dedo sin mover la cabeza. Levante las cejas. Cierren los ojos. No me deje abrirlos. Sonría . Haga lo que hago. Doble a la derecha. Doble a la izquierda. Contra la mano. Mire arriba. Mire abajo. Saque la lengua al lado. Al otro lado. Dígame, "ah." ¿Le duele cuando toco aquí? Empuje contra las manos. Apriete los dedos.	And with your right eye closed, read it backwards. Perfect. Look at the point behind and after to your nose. And follow my finger without moving your head. Raise your eyebrows. Close your eyes. Don't let me open them. Smile. Do what I do. Turn to the right. Turn to the left. Against my hand. Look up. Look down. Stick out your tongue to the side. To the other side. Say, "Ah." Does it hurt when I touch here? Push against my hands. Squeeze my fingers.
Ahorita, no me duele la cabeza. Pero va a volver, ya sé. ¿Qué piensa doctor?	Now, my head doesn't hurt. But it's going to come back, I know. What do you think, doctor?

Caso #7: Un hombre de 56 años que tiene un dolor de cabeza, la primera cita a su oficina

Bueno, cuando llegó, la enfermera chequeó la presión y estaba al punto de nivel alto. 138/86. Pero los síntomas parecen como “ una cefalea en racimos .” Son episodios de dolor muy intensos . Afectan los hombres más que las mujeres. Y con mucha frecuencia ocurren antes de despertarse, durante la noche.	Well, when you arrived, the nurse checked your pressure and it was on the point of being high. 138/86. But your symptoms seem like a “cluster headache.” They’re very intense episodes of pain. They affect men more than women. And frequently they occur before waking up, during the night.
¿Hay una medicina que puedo tomar?	Is there a medicine that I can take?
Sí, le voy a recetar una medicina que se llama “un triptán.” Cuando está en el punto de tener un ataque, tome una pastilla. Si no le ayuda con el dolor tan intenso, puede ir a la emergencia para un tratamiento de oxígeno. Y si continúan las cefaleas por bastante tiempo, intentaremos otra medicina para controlar y prevenir las cefaleas.	Yes, I’m going to prescribe you a medicine that’s called a “triptan.” When you’re about to have an attack, take a pill. If it doesn’t help you with the intense pain, you can go to the emergency room for an oxygen treatment. And if the headaches continue for enough time, we’ll try another medicine to control and prevent the headaches.
Ay. Muchas gracias, doctor. Es un dolor tan intenso, mi mujer estaba preocupada que tenía un derrame.	Ay. Thanks, doctor. It’s such intense pain, my wife was worried that I had a stroke.
Sí, entiendo. Llame a la oficina si hay problemas con el seguro y no se quiere pagar por la medicina. Espero que mejore el dolor.	Yes, I understand. Call the office if there are problems with your insurance and they don’t want to pay for the medicine. I hope that your pain improves.