

МІНІСТЕРСТВО ОСВІТИ І НАУКИ УКРАЇНИ
ДВНЗ “ПРИКАРПАТСЬКИЙ НАЦІОНАЛЬНИЙ УНІВЕРСИТЕТ
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**Guide to
Arthur Hailey’s “The Final Diagnosis”**

Навчальний посібник для студентів 3-4 курсів

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Навчальний посібник створено з метою ознайомити студентів з основними принципами опрацювання художнього тексту, збагатити мовний запас (зокрема медичною термінологією), покращити навички читання та перекладу художніх/фахових текстів, сформуванати навички аналітичного читання художнього тексту.

Розробки базуються на матеріалі сучасної англomовної прози і уривків із фахового медичного дискурсу, та розраховані на 10 занять. Структура посібника передбачає послідовне виконання практичних усних та письмових завдань, що вимагає творчого підходу та використання, окрім отриманої у тексті інформації, також власного досвіду та знань.

Посібник призначено для студентів англійського відділення, для студентів німецького та французького відділень, котрі вивчають англійську як другу мову, для аудиторної та самостійної роботи.

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*Друкується за ухвалою вченої ради факультету іноземних мов Прикарпатського національного університету імені Василя Стефаника
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ПЕРЕДМОВА

Виклики, які перед філологом ставлять інтеграційні процеси у суспільстві, науці та культурі, вимагають володіння фаховою термінологією іноземної мови. Тому метою посібника з аналітичного читання англійською мовою за романом ARTHUR HAILEY “THE FINAL DIAGNOSIS” є ознайомити студентів з основними принципами опрацювання художнього тексту, збагатити мовний запас (зокрема медичною термінологією), покращити навички читання та перекладу художніх/фахових текстів, сформувати навички аналітичного читання художнього тексту. Розвиток даних умінь забезпечує, у першу чергу, самостійне читання оригінального тексту художньої літератури з подальшим обговоренням в аудиторії під керівництвом викладача. Посібник розрахований на студентів англійського відділення, студентів німецького та французького відділень, котрі вивчають англійську як другу мову, для аудиторної та самостійної роботи.

Вибір роману Артура Хейлі “Кінцевий діагноз” для розробки зумовлений надзвичайною популярністю автора, приналежністю роману до бестселерів світової літератури та його фактичною реалістичністю, що зумовлена особистим стилем автора. Медична тематика роману відповідає програмі II-го курсу факультету романо-германської філології зі спеціальності “англійська мова і література”. Роман “Кінцевий діагноз” Артура Хейлі відкриває для студентів світ реальних життєвих ситуацій, безпосередніх міжособистісних взаємин героїв (медиків та їх пацієнтів), що досягається за допомогою багатой проблематики роману, переплетіння кількох взаємодоповнюючих сюжетних ліній, яскравих описів, продуманих та реалістичних діалогів.

Запропоновані у посібнику завдання спонукають студентів до критичного та аналітичного мислення у процесі вирішення життєво важливих етичних ситуацій (самореалізація, самоствердження особистості; соціально-моральний устрій сім'ї; проблема батьків і дітей; кохання і дружба, особисте життя і кар'єра; дослідження стилів життя; сучасні та глобальні соціальні проблеми; проблема правильного вибору та боротьба мотивів, пов'язаних із ним; випробування людини на моральну зрілість; вплив на людей високої моральності; готовність до подвигу, його мотиви і пов'язані з цим обставини та наслідки; самоаналіз своєї поведінки; суд честі і совісті; переживання наслідків морально помилкового вчинку чи вибору; проблема фахової компетентності та

відповідальності медика; тощо). Все це наповнює процес навчання глибоким виховним й морально-етичним змістом, сприяє формуванню активної життєвої позиції, збагачує аналіз роману в єдності його змісту і форми, підвищує інтерес студентів до англійської літератури.

Практична спрямованість завдань сприятиме наступному: 1) збагаченню лексичної бази студентів медичною термінологією; 2) поглибленню інформаційних знань у галузі медицини; 3) активізації самостійного мислення студентів; 4) розвитку навичок техніки читання, перекладу та усного мовлення; 5) формуванню іншомовної комунікативної компетентності; 6) удосконаленню навичок застосування граматики англійської мови; 7) розвитку умінь написання есе на важливі соціально-побутові, філософські теми; 8) ознайомленню з елементами стилістичного аналізу; 9) удосконаленню умінь користування лексикографічними джерелами; 10) здійсненню проектної діяльності з використанням сучасних технологій та програм (створення мультимедійних презентацій, тощо).

Посібник складається із 10 розробок (assignments), кожна з яких охоплює:

1) уривок роману для самостійного читання;

2) список слів, словосполучень і виразів для вивчення й актуалізації у реченнях чи діалозі;

3) групи вправ, спрямовані на перевірку розуміння тексту, самостійну роботу студентів із лексикографічними джерелами у процесі пошуку визначень медичних термінів та аббревіатур, тощо;

4) перелік питань для обговорення змісту роману, характеристики героїв, описаних подій, їх морально-етичних аспектів, тощо;

5) уривок роману для здійснення літературного перекладу та в окремих випадках стилістичного аналізу;

6) уривок фахового медичного тексту, який перекликається із медичними проблемами, описаними у романі, для ознайомлення студентів із фаховим дискурсом, поглибленням знань у медичній галузі, активізації вивченої лексики та забезпечення можливості глибшого екскурсу в описані у романі події;

7) перелік тем для написання есе соціально-побутової та філософської проблематики, актуалізованої у романі.

У посібник включено два додатки. Перший містить завдання для самостійної роботи студентів, яка включає розробку проектів з елементами

акторської гри та перекликається із описаними у романі подіями чи може бути їх наслідком. Зокрема, розігрування у групах судового процесу над лікарем із захистом, свідками, постраждалим та стороною обвинувачення; підготовка інсценування конференції, присвяченої останнім розробкам у медичній галузі, їхній важливості та необхідності; розробці у групах гіпотетичного медичного відкриття та представлення його на інсценованому семінарі з мультимедійною чи іншого формату презентацією, його обговоренням та нагородженням найкращого. Другий додаток містить варіанти гри із студентами для активації вивченого лексичного матеріалу, розвитку діалогічного мовлення, аналітичного мислення та внесення розважального елемента з метою зацікавлення студентів.

ABOUT THE WRITER

Arthur Frederick Hailey (April 5, 1920 – November 24, 2004) was a British-Canadian novelist. He was born on April 5, 1920, in Luton, Bedfordshire, England to a family of George Wellington Hailey, a factory worker, and Elsie Wright Hailey. Arthur Hailey began to write at a young age.

He worked as an office boy and clerk in London from 1934 to 1939. In 1939 Hailey joined the Royal Air Forces, and served as a pilot during World War II. In 1947 he emigrated to Toronto, Canada and worked in such fields as real estate, sales, and advertising. There Arthur Hailey became also an editor of a trade magazine *Bus and Truck Transport*.

Hailey's successful writing career began in 1955 with a script called *Flight into Danger*, which was purchased by the Canadian Broadcasting Corporation. The story was filmed in 1957 as *Zero Hour!* by Paramount [17].

During the next few years, he wrote teleplays for such legendary dramatic series as "Playhouse 90" (1956), "Kraft Television Theatre" (1947), "The United States Steel Hour" (1953), "Goodyear-Philco Playhouse" (1955) and "Studio One" (1948). Soon after, "Flight Into Danger" was adapted as a novel, "Runway Zero-Eight" (1958). In 1959, "The Final Diagnosis" became his second bestseller and, in 1961, "In High Places" became his third. In four years Hailey writes his next novel: "Hotel" (1965), which remained on the national bestseller lists for a full year. "Airport" (1968) overdid it, staying in the number one spot on The New York Times bestseller lists for 30 weeks. "Wheels" (1971), "The Moneychangers" (1975) and "Overload" (1979) further established Hailey as one of today's most popular novelists.

In 1979, Arthur Hailey announced his retirement. At this time, he discovered he was very ill and underwent a heart operation. The surgery was a tremendous success. Afterwards, being full of creative energy, he wrote the novel "Strong Medicine" [8].

Arthur Hailey received a lot of awards: Canadian Council of Authors and Artists award (1956); Best Canadian TV Playwright award (1957, 1958); Doubleday Prize Novel award (1962).

Personal writing style.

Arthur Hailey has developed a successful process of novel writing. Whether he was writing about doctors (*The Final Diagnosis*, *Strong Medicine*) or airline pilots

(*Flight into Danger*), hotels (*Hotel*) or airports (*Airport*), government (*In High Places*) or industry (*Wheels*), he followed the same procedure. Each of his novels was filled with enough information about the subject of his profound research to satisfy the most curious reader. He created enough character types to appeal to the widest audience. The complex web of plots and sub-plots was to meet every reader's desire for a good, suspenseful story.

Hailey wrote documentary fiction. It has also been called "faction" – a mixture of the real and the fictitious. Hailey usually spent three years on each book. The first year was dedicated to research, then six months to reviewing his notes, and finally 18 months to writing. Hailey gave his reader as much factual information as he could work into the novel. Consequently, only his characters and situations are imaginary, and they are sometimes only slightly fictitious [7].

Personal life.

Hailey was married twice. In 1944 he married Joan Fishwick (1918-2004), with whom he had three children. They divorced in 1950. In 1951 he married Sheila Dunlop (1927) and they also had three children. In 1978 Sheila Hailey published *I Married a Best Seller: My Life with Arthur Hailey*. The couple lived together for 53 years.

Arthur Hailey died in his sleep on November 24, 2004, of a stroke [17].

ASSIGNMENT 1 (Chapters 1-2)

1. Study the short survey of Arthur Hailey's biography. Answer the questions:

What is the background of the novel? How did Arthur Hailey get the idea of writing "The Final Diagnosis"?

What is the connotation of the title?

What plot does the title of the novel suggest?

2. Give the short summary of the passage under study.

3. Study the active vocabulary:

- *patient*
- *admission*
- *ward*
- *out-patient clinics*
- *waiting-room*
- *private-patient fee*
- *vomiting*
- *diarrhoea*
- *tumour*
- *pathologist*
- *autopsy protocol*
- *The Health Board*
- *heart attack*
- *physical condition*
- *surgical floor*
- *surgeon*
- *aspiration*
- *anesthesia*

4. Get acquainted with the following phrases:

- ✓ *to maintain a shuttle service* – постійно бігати туди-сюди;
- ✓ *to be at one's imperious worst* – бути не в гуморі;
- ✓ *to stand one's ground* – продовжувати наполягати на своєму;
- ✓ *to cut smb short* – перебивати когось;
- ✓ *all hell breaks loose* – розпочинається Содом і Гоморра;

- ✓ *to quell one's conscience by* – заспокоювати свою совість тим, що ...;
- ✓ *a deal is getting hot* – угоду необхідно закінчувати;
- ✓ *a stomach is ready to do flip-flops* – підступають напади нудоти;
- ✓ *to have a painless, pleasant way of imparting sound instruction* – вміти

необразливо і ввічливо пояснювати;

✓ *to shelve one's earlier doubts* – тимчасово не висловлювати своїх сумнівів;

✓ *to fall prey to complacency and lassitude* – самовдоволеність одних та інертність інших зробили свою справу;

✓ *a few of the botchers, the assembly-line appendix removers* – декілька горе-хірургів, які вміють хіба що апендицити видаляти;

✓ *a record is good* – хороший фахівець.

5. Make up 5 sentences using the above mentioned expressions.

6. Match the terms with their definitions.

1. Gallstone	2. Tracheitis	3. Obstetrician	4. Otoscope
5. Aspiration	6. Tumour	7. Rectum	8. Pathologist
9. Tonsillectomy	10. Sterile	11. Malignant	12. Benign

a.– an instrument for examining the external canal and tympanic membrane of the ear.

b.– an abnormal growth of tissue resulting from uncontrolled, progressive multiplication of cells and serving no physiological function; a neoplasm.

c.– a doctor who specializes in pathology; especially : a doctor who examines bodies to find out the cause of death.

d.– an operation to remove a person's tonsils.

e.– the act of inhaling fluid or a foreign body into the bronchi and lungs, often after vomiting.

f.– inflammation of the trachea.

g.– the comparatively straight, terminal section of the intestine, ending in the anus.

h.– an abnormal stonelike mass, usually of cholesterol, formed in the gallbladder or bile passages.

i.– a physician who specializes in obstetrics.

j.– free from living germs or microorganisms.

k.- (of a tumor) characterized by uncontrolled growth; cancerous, invasive, or metastatic.

l.- (pathol) (of a tumour, etc) not threatening to life or health; not malignant.

7. Fill in the blanks using the words from the box.

forceps	condition	abscess	removal of tonsils
autopsy	surgeons	tiny portion	

a) He knew what Bartlett was referring to – it was one of the lesser known effects which sometimes followed 1._____ from an adult. Like most 2._____, O'Donnell was aware that even with extreme operative care a 3._____ of tonsil sometimes escaped the surgeon's 4._____ and was drawn into the lung where it formed an 5._____. Now he recalled a group of pictures he had of the trachea and lung, portraying this 6._____; they had been taken during an 7._____.

stomach	fluoroscope	barium	organ
oesophagus	duodenum	palpated	

b) In the 1._____ Bell watched the path of the barium as it coursed first through the 2._____, then into the 3._____, and from there into the 4._____. Sharpened by the opaque liquid, the outline of each 5._____ was clearly visible, and at various stages Bell thumbed a button recording the results on film. Now he 6._____ the patient's abdomen to move the 7._____ around.

surgical rules	tissue committee	operating-room committee
surgery	organs	

c) Between them they had tightened 1._____ and had formed a strong 2._____ to enforce them. A 3._____, almost defunct, was reactivated – its job, to ensure that mistakes in 4._____, particularly the unnecessary removal of healthy 5._____, were not repeated.

8. Present the literary translation of the passage.

The chief dietitian was not the only one in the hospital whose thoughts were on food. In Radiology, on the second floor, an outpatient—Mr. James Bladwick, vice-president of sales for one of Burlington’s big-three automobile dealerships—was, in his own words, “as hungry as hell.”

There was reason for this. On his physician’s instructions Jim Bladwick had fasted since midnight, and now he was in number one X-ray room, ready for a gastric series. The X-rays would confirm or deny the suspicion that flourishing in the Bladwick interior was a duodenal ulcer. Jim Bladwick hoped the suspicion was unfounded; in fact, he hoped desperately that neither an ulcer nor anything else would conspire to slow him down now that his drive and sacrifice of the past three years, his willingness to work harder and longer than anyone else on sales staff, were at last paying off.

Sure he worried; who wouldn’t when they had a dealer sales quota to meet every month. But it just couldn’t be an ulcer; it had to be something else—something trivial that could be fixed up quickly. He had been vice-president of sales only a matter of six weeks, but despite the high-sounding title he knew better than anyone that retention of it depended on a continued ability to produce. And to produce you had to be on the ball—tough, available, fit. No medical certificate would compensate for a declining sales graph [9, c. 17-18].

9. Answer the questions on the text.

- a) Innumerate the hospital departments and medical professions mentioned in the passage under study. What emotional colouring characterizes their description?
- b) How does the author describe the doctors’ attitudes towards patients and diseases?
- c) Find the examples of irony and doctors’ humour in the passage. What are they aimed at?
- d) Present the description of Dr. Pearson’s character while analyzing his appearance, behavior and colleagues’ treatment given by the author.
- e) Single out the stylistic devices used by the author.
- f) Analyse the metaphor: DIAGNOSIS IS A VERDICT. Exemplify using sentences from the text.
- g) What are the basic tenets of medicine? Why?

h) Discuss the importance of the elaboration and promotion of modern developments in the hospitals and clinics. What obstacles can accompany these processes? How did they influence the progress of Three Counties Hospital?

10. Read the excerpt from the journal article. Put the verbs in brackets in the correct form. Answer the questions.

Duty of Care and Medical Negligence

The Department of Health 1. _____ (**to estimate**) that 10% of hospital inpatient admissions 2. _____ (**to result**) in an adverse event, but <2% of claims for medical negligence 3. _____ (**to handle**) by the NHS Litigation Authority 4. _____ (**to result**) in court action. However, both the number of claims for negligence and the sums involved in settlement 5. _____ (**to increase**) and so it is important that anaesthetists 6. _____ (**to understand**) the factors 7. _____ (**to lead**) to a possible civil claim for negligence and the potentially considerably more serious charge of criminal negligence, both of which can arise from failures to uphold a suitable standard of care. This article 8. _____ (**not to consider**) claims of negligence in relation to consent which 9. _____ (**to consider**) in a separate article in the journal [4].

What problem is discovered in the article?

What can be the solutions to this problem? Who should deal with it? Give your opinion.

11. Write an essay on the topic:

The importance of education and experience in the medical profession

ASSIGNMENT 2 (Chapters 3-4)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *obstetrics*
- *obstetrician*
- *urgent case*
- *gastric series*
- *palpate*
- *fluoroscope*
- *Neurology*
- *Psychiatry*
- *Pediatrics*
- *Dermatology*
- *Urology*
- *bandage*
- *malignant*

3. Translate the following phrases:

- ✓ *death not withstanding*
- ✓ *he appeared to consider*
- ✓ *here comes the sales pitch*
- ✓ *What an unabashed, natural ham!*
- ✓ *from the next of kin*
- ✓ *to be standing up to smth well*
- ✓ *to cut smb off for good*
- ✓ *to be usually more at home*
- ✓ *to get away with*
- ✓ *to be surreptitious about smth*
- ✓ *be at ease*
- ✓ *a wanton mistake*
- ✓ *to have a hindsight*
- ✓ *to quit riding people*
- ✓ *to be up to one's ears*
- ✓ *to find one's patience ebbing*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the terms with their definitions.

1. Residency	2. Incision	3. Skull
4. Putrefaction	5. Membrane	6. Pericardium
7. Intestine		

a. – the skeleton of the head of a vertebrate forming a bony or cartilaginous case that encloses and protects the brain.

b. – a period of advanced training in a medical specialty that normally follows graduation from medical school and licensing to practice medicine.

c. – a cut or wound of body tissue made especially in surgery.

d. – the decomposition of organic matter; especially : the typically anaerobic splitting of proteins by bacteria and fungi with the formation of foul-smelling incompletely oxidized products.

e. – the conical sac of fibrous tissue that surrounds the heart and the roots of the great blood vessels.

f. – the digestive tube passing from the stomach to the anus.

g. – a thin layer of tissue composed of epithelial cells and connective tissue that covers a surface, lines a cavity, or divides a space in the body.

6. Find synonyms and antonyms for the terms “*medicine*” and “*medical*”.

7. Find the medical terms which are equivalents for the following abbreviations: RF, SX, T, TPR, USOH, VS, WBC, WNL ABX, MDD, AXR, BAC, BC, Bx, CXR.

8. Fill in the blanks using the words from the box.

diseases	tests	final diagnosis	malignant
pathology	blood	benign	physician

a) It is pathology which 1. _____ a patient’s 2. _____, checks his excrements, tracks down his 3. _____, decides whether his tumour is 4. _____ or 5. _____. It is 6. _____ which advises the patient’s 7. _____ on disease and sometimes, when all else in medicine fails’ – Pearson paused, looked down significantly at the body of George Andrew Dunton, and the

eyes of the nurses followed him – ‘it is the pathologist who makes the 8._____.’

heart-muscle arteries
medical history

examine
coronary attack

b) ‘The 1._____ of this man shows that three years ago he suffered a first 2._____ and then a second attack earlier this week. So first we’ll 3._____ the coronary arteries.’ As the nurses watched intently Pearson delicately opened the 4._____.

transparent

pleura

lungs

tuberculosis

fibrous

c) Pearson moved aside, and the pathology resident leaned over the area that Pearson had been studying. He nodded. The 1._____, normally a 2._____, glistening membrane covering the 3._____, had a thick coating of scarring – a dense, white 4._____ tissue. It was a signal of 5._____; whether old or recent they would know in a moment. He moved aside for Seddons.

9. Answer the questions on the text.

- a) What makes medical workers joke at work and about their work?
- b) Present the description of Mike Seddons’ character, while analyzing his appearance, behavior and colleagues’ treatment given by the author. Is it positive or negative?
- c) Analyze the metaphor: AUTOPSY IS A COMMAND PERFORMANCE. Exemplify using sentences from the text. How does it reveal and characterize the professionalism of the heroes and ranking in the hospital?
- d) How can autopsy save lives?
- e) Discuss the problem of the affairs between colleagues. Who do you think is going to have a love affair in Three Counties Hospital? Search the examples of flirtation in the text.
- f) How does medical profession influence the personality? Find the hints in the text.
- g) What is the cost of a doctor’s mistake? Use examples from the text.

10. Present the literary translation of the passage. Perform its stylistic analysis:

Watching McNeil, his hands steady and competent, Seddons found himself wondering again what went on in the pathology resident's mind. He had known McNeil for two years, first as a fellow resident, though senior to himself in the hospital's pyramid system, and then more closely during his own few months in Pathology. Pathology had interested Seddons; he was glad, though, it was not his own chosen specialty. He had never had second thoughts about his personal choice of surgery and would be glad when he went back to it in a few weeks' time. In contrast to this domain of the dead the operating room was a territory of the living. It was pulsing and alive; there was a poetry of motion, a sense of achievement he knew he could never find here. Each to his own, he thought, and pathology for the pathologists.

There was something else about pathology. You could lose your sense of reality, your awareness that medicine was of and for human beings. This brain now . . . Seddons found himself acutely aware that just a few hours ago it was the thinking center of a man. It had been coordinator of the senses—touch, smell, sight, taste. It had held thoughts, known love, fear, triumph. Yesterday, possibly even today, it could have told the eyes to cry, the mouth to drool. He had noticed the dead man was listed as a civil engineer. This, then, was a brain that had used mathematics, understood stresses, devised construction methods, perhaps had built houses, a highway, a water works, a cathedral—legacies from this brain for other humans to live with and use. But what was the brain now?—just a mass of tissue, beginning to be pickled and destined only to be sliced, examined, then incinerated [9, c. 43-44].

11. Make up and act out a dialogue between the former lovers who continue working together in one hospital.

12. Put the paragraphs of the article in the correct order. Check the results in pairs and then with the rest of the group. Answer the questions.

1. _____; 2. _____; 3. _____; 4. _____.

Health workers warned against dating former patients

*Sarah Boseley,
health editor*

a) They would be encouraged not only to attempt to avoid any relationship themselves, but also to speak out if they were aware of a colleague becoming involved.

b) A comprehensive package of reforms, which starts with the training of medical staff, will be published by the Council for Healthcare and Regulatory Excellence in the summer in the hope of changing medical culture.

c) Doctors, nurses, midwives and all other healthcare professionals are to be told that sexual relationships not only with patients but also former patients are unacceptable, under draft proposals from regulators.

d) According to Professor Julie Stone, the council's former deputy director and executive lead on the project, there is a need to go beyond mere guidelines to try to establish a culture in which healthcare staff have a deeply rooted understanding of the damage that can be done by becoming involved with a patient. [3]

Why is the type of relationship described in the article that dangerous and so widely spread?

ASSIGNMENT 3 (Chapters 5-7)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *blood transfusion*
- *morphine*
- *rigid pain*
- *chest film*
- *immediate exploratory surgery*
- *flagrant case*
- *benign*
- *senior practitioner*
- *rib cutters*
- *skull*
- *sterile*
- *infection*
- *pathology resident*

3. Translate the following phrases:

- ✓ *'kerbstone consultations'*
- ✓ *wall-to-wall grin*
- ✓ *the jet age*
- ✓ *formal frills*
- ✓ *to be on to a side line*
- ✓ *a printed voucher*
- ✓ *a breeding ground for politics*
- ✓ *join some hole-and-corner conspiracy to boot smb out*
- ✓ *from rote rather than reasoning*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the terms with their definitions.

1. Morphine	2. Serology	3. Pneumonia	
4. Herniorrhaphy	5. Transfusion	6. Mitral valve	7. Gynaecology

- a. – an operation for hernia that involves opening the hernial sac, returning the contents to their normal place, obliterating the hernial sac, and closing the opening with strong sutures.
- b. – a valve in the heart that is situated between the left atrium and the left ventricle.
- c. – a medical science dealing with blood sera and especially their immunological reactions and properties.
- d. – a branch of medicine that deals with the diseases and routine physical care of the reproductive system of women.
- e. – the process of transfusing fluid into a vein or artery.
- f. – a powerful narcotic agent that has strong analgesic (pain relief) action and other significant effects on the central nervous system.
- g. – inflammation of the lungs caused by fungi, bacteria, or viruses.

6. Find synonyms and antonyms for the term “*disease*”.

7. Answer the questions on the text.

- a) What was the Seddons’ policy? Why?
- b) What is more important marriage or career? What is Lusy’s opinion on the subject?
- c) Why did O’Donnell convene the under-the-table meeting? What was on the agenda?
- d) Compare the two friends: Dr. Pearson and Dr. Dornberger. Use quotations from the text to prove your opinion.
- e) How has Dornberger avoided becoming impervious, mechanical and unsentimental under the influence of medicine?
- f) What in the passage under study proves the importance of proper education and experience for a medical worker?
- g) Perform the analysis of the metaphor DISSECTING-ROOM IS A BUTCHER’S SHOP.

8. Present the literary translation of the passage. Analyze the stylistic devices used.

The cafeteria of Three Counties Hospital was a traditional meeting place for most of the hospital grapevine, its stems and branches extending tenuously to every section and department within Three Counties’ walls. Few events occurred in the

hospital – promotions, scandals, firings, and hirings – which were not known and discussed in the cafeteria long before official word was ever published.

Medical staff frequently used the cafeteria for “curbstone consultations” with colleagues whom they seldom saw except at a meal or coffee break. Indeed, a good deal of serious medical business was transacted over its tables, and weighty specialist opinions, which at other times would be followed by a substantial bill, were often tossed out freely, sometimes to the great advantage of a patient who, recovering later from some ailment which at first had proven troublesome, would never suspect the somewhat casual channels through which his eventual course of treatment had come [9, c. 66-67].

9. Read the article. Put the verbs in brackets in the correct form. Answer the questions.

Characteristics of the MDR-TB Outbreaks

How did multidrug-resistant tuberculosis develop? Multiple reasons account for the increased incidence of MDR-TB, but several factors warrant comment. Drug resistance 1. _____ (**to develop**) primarily as a result of noncompliance with prescribed anti-TB therapy among patients with active tuberculosis. Many patients 2. _____ (**to start**) on appropriate therapy, but adequate and complete medical followup 3. _____ (**not to occur**). Such followup must be consistently carried out to ensure ongoing compliance, completion of therapy, and successful outcomes. Failure 4. _____ (**to do**) this left many persons in the community with partially and unsuccessfully 5. _____ (**to treat**) TB. This unsuccessfully treated population 6. _____ (**to become**) the source of MDR-TB.

A second factor 7. _____ (**to be**) the failure of health care workers 8. _____ (**to suspect**) a case of active tuberculosis and rapidly 9. _____ (**to isolate**) infectious TB patients. Patients who 10. _____ (**not to recognize**) as having active TB may 11. _____ (**to expose**) other persons to the disease both in the hospital and in the community. Among HIV-infected persons, the consequences of failing to recognize possible exposure or active disease 12. _____ (**to devastate**). In addition, the absence of proper ventilation on hospital wards and in outpatient facilities, as well as in any of a number of other care facilities, 13. _____ (**to lead**) to the spread of TB in hospitals, prisons, homeless shelters, and other settings [14].

*Why is multidrug-resistant tuberculosis regarded as highly dangerous?
What are the factors of its development?*

10. Make up and act out a dialogue between the colleagues of a medical institution discussing the drawbacks of their profession.

11. Write an essay on one of the topics:

What are the basic problems of the healthcare system of Ukraine?

Why do some people treat love as a kind of disease?

How can one cure a broken heart?

ASSIGNMENT 4 (Chapters 8-9)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *coronary*
- *blood test*
- *incision*
- *rib cage*
- *pericardium*
- *abdomen*
- *stomach*
- *intestines*
- *artery*
- *bone*
- *membrane*
- *brain*
- *vein*
- *thrombosis*

3. Translate the following phrases:

- ✓ *to reconcile smb with smb*
- ✓ *in the competitive maelstrom of large-scale retail merchandising*
- ✓ *have a trick of taking the edge from a remark*
- ✓ *to be at ease in the environment of medicine*
- ✓ *what to make of it*
- ✓ *to put on an act*
- ✓ *a cheap skate*
- ✓ *to be endeavouring to catch up with*
- ✓ *there is no point in holding back*
- ✓ *to be sounding off now*

3. Make up 5 sentences using the above mentioned expressions.

4. Match the terms with their definitions.

1. Rheumatism	2. Histology	3. Poliomyelitis
4. Gout	5. Microtome	6. Heredity

a. – an acute infectious virus disease caused by the poliovirus, characterized by fever, motor paralysis, and atrophy of skeletal muscles often with permanent disability and deformity, and marked by inflammation of nerve cells in the ventral horns of the spinal cord.

b. – a metabolic disease marked by a painful inflammation of the joints, deposits of urates in and around the joints, and usually an excessive amount of uric acid in the blood.

c. – any of various conditions characterized by inflammation or pain in muscles, joints, or fibrous tissue.

d. – the transmission of traits from ancestor to descendant through the molecular mechanism lying primarily in the DNA or RNA of the genes.

e. – an instrument for cutting sections (as of organic tissues) for microscopic examination.

f. – a branch of anatomy that deals with the minute structure of animal and plant tissues as discernible with the microscope.

5. Find the synonyms and antonyms for the term “*doctor*”.

6. Say whether the statements are true or false. For the false statements give the true information.

1) O’Donnell is a founder of a department-store empire, millionaire philanthropist, and member of the board of directors of Three Counties Hospital.

2) E. Swayne will donate quarter million dollars to the hospital if Dr Pearson remains in charge of Gynaecology.

3) Pearson wanted to get Dornberger’s advice on whether to agree on another pathologist.

4) Seddons had to finish the date with Vivian, because he had an emergency call at work.

5) Dr Pearson was extremely interested in getting a tissue processor.

7. Read the extract. Correct 14 spelling mistakes. Present its literary translation.

“They’re part of ivolution and evolution is a part of nature. It all ads up to the balancing proses.”

Admirringly O’Donnell thought: You can’t shake the old son of a gun easily. But he saw the chink in the other’s argument. He said, “If you’re right, then medisine is a part of the belencing process too.”

Swayne snipped back, “How do you reason that?”

“Because medicine is a part of evolution.” Despite his good resolution O’Donnell felt his voice grown more intence. “Because every change of environment that man has had produced its problems for medicine to face and to try to solwe. We never solve them entirely. Medicine is always a little behind, and as fast as we meet one problem there’s a new one apearing ahead.”

“But they’re problems of medicine, not nature.” Swayne’s eyes had a malacious gleam. “If nature were left alon it would settle its problems before they arose – by natural selection of the fitest.”

8. Match the utterance with the name of the person whom it belongs to.

1. Dr Pearson	2. Mike Seddons	3. John Alexander
4. Eustace Swayne	5. O’Donnell	

a. (___) “That’s why we fought polio, Mr. Swayne, and the black plague, and smallpox, and typhus, and syphilis. It’s why we’re still fighting cancer and tuberculosis and all the rest. It’s the reason we have those places you talked about—the sanatoria, the homes for incurables. ...<<”

b. (___) “Have you seen anybody about it?”

c. (___) “Dr Pearson and I play a lot of chess.”

d. (___) “What is this? More trouble?”

e. (___) “It’s about speeding up the surgical reports, Doctor.”

9. Answer the questions on the text.

a) Why was Eustace Swayne not sure that defeating polio had been a good or necessary thing? How do you understand this statement? Do you agree with it?

b) Which kind of woman is better for O’Donnell: one who is close to his working life, or someone separate and detached, with other interests beyond the daily rounds?

- c) How has Dornberger managed to persuade Pearson to accept another pathologist?
- d) Why couldn't Seddons forget about Vivian? Was it love?
- e) What is considered by O'Donnell the only real problem of medicine?

10. Make up and act out a dialogue between two doctors and Eustace Swayne, discussing the importance of medicine. One of the doctors lives in the time of epidemic of the disease with no medicines available. The other one lives in the time of the similar epidemic but with the effective medicines to defeat the illness.

11. Read the article. Fill in the gaps using the words from the box. Answer the questions.

antibiotics	populations	viruses	cells	blocking
structure	significantly	stimulate	controlling	damaging
antivirals	surrounded	reproduction		

The top 10 medical advances in history

Monique Ellis

Antiviral drugs (1960s)

Terrible 1._____ such as small-pox, influenza and hepatitis have ravaged many human 2._____ throughout history. Unlike the sweeping success of 3._____ in the late 1930s and 1940s, the development of 4._____ did not really take off until the 1960s. This was mostly due to the 5._____ of a virus, which was a core of genetic material 6._____ by a protective protein coat that hides and reproduces inside a person's 7._____. As the virus information is so protected, it was difficult to treat them without 8._____ the host cell. Over the years antivirals have improved 9._____, and work by 10._____ the rapid 11._____ of viral infections, and some can even 12._____ the immune system to attack the virus. The development of effective antivirals has been significant in treating and

13. _____ the spread of deadly virus outbreaks such as HIV/AIDS, Ebola and rabies [5].

Do you agree with the information in the article concerning the importance of antivirals?

Do you use antivirals? Do you consider them effective? Why? Why not?

12. Write an essay on the topic:

Medicine and hygiene standards in public institutions

ASSIGNMENT 5 (Chapters 10-11)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *spinal cord*
- *formalin*
- *coronary attack*
- *coronary arteries*
- *heart-muscle arteries*
- *fibrous tissue*
- *infarct*
- *ventricle*
- *pleura*
- *examine*
- *transparent*
- *scarring*
- *palpate*
- *evidence*
- *cavities*

3. Translate the following phrases:

- ✓ *thought of in financial terms*
- ✓ *to be mentally far out front*
- ✓ *as a matter of course*
- ✓ *into a kinder mould*
- ✓ *to be making a quick assessment of one's surroundings*
- ✓ *to stand up to scrutiny*
- ✓ *small talk*
- ✓ *a cool customer*
- ✓ *a touch of down-to-earth humanity*
- ✓ *to save the big guns for things that really matter*
- ✓ *a pussyfooter*
- ✓ *not to take a long lease*
- ✓ *talk smb out of smth*
- ✓ *a down payment*

- ✓ *a state of perpetual running warfare*
- ✓ *to get smart*
- ✓ *at one's crudest*
- ✓ *smart-aleck college graduate*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the terms with their definitions.

1. Sensitized	2. Biopsy	3. Specimen	4. Rh negative
5. Sedation	6. Rh positive	7. Periosteum	

- a. – lacking Rh factor in the blood.
- b. – containing Rh factor in the red blood cells.
- c. – to make sensitive or hypersensitive.
- d. – the removal and examination of tissue, cells, or fluids from the living body.
- e. – the inducing of a relaxed easy state especially by the use of sedatives.
- f. – the membrane of connective tissue that closely invests all bones except at the articular surfaces.
- g. – a portion or quantity of material for use in testing, examination, or study.

6. Find synonyms and antonyms for the term “*diagnosis*”.

7. Present the literary translation of the passage.

Of all his traits of character David Coleman had long suspected pride to be the strongest, and it was a defect he feared and hated most. In his own opinion he had never been able to conquer pride; he spurned it, rejected it, yet always it came back—seemingly strong and indestructible.

Mostly his pride stemmed from an awareness of his own superior intellect. In the company of others he frequently felt himself to be mentally far out front, usually because he was. And, intellectually, everything he had done so far in his life proved this to be true.

As far back as David Coleman could remember, the fruits of scholarship had come to him easily. Learning had proved as simple as breathing. In public school, high school, college, medical school, he had soared above others, taking the highest

honors almost as a matter of course. He had a mind which was at once absorbent, analytical, understanding. And proud.

He had first learned about pride in his early years of high school. Like anyone who is naturally brilliant, he was regarded initially by his fellow students with some suspicion. Then, as he made no attempt to conceal his feelings of mental superiority, suspicion turned to dislike and finally to hate [9, c. 122-123].

8. Make up and act out a dialogue between Dr. Coleman and his “Pride” in the process of selecting a hospital to work in.

9. Answer the questions on the text.

- a) Why has David Coleman chosen the Three Counties Hospital?
- b) What were the anxieties of Elizabeth Alexander? What were they caused by? How has Dr Dornberger managed to calm her down?
- c) What had aviation and medicine in common in Dr Kent O’Donnell’s opinion?
- d) Compare David Coleman and Dr Pearson. What do they have in common and in what way do they differ?
- e) Why could David Coleman turn out to be the wrong man for Three Counties Hospital?
- f) Why had John Alexander decided to enrolle in medical-technology school and had not entered any medical school?
- g) What was Vivian’s possible diagnosis? Why was Seddons that scared by it?
- h) What was the point of the argument between John Alexander and Bannister?

10. Read the article. Fill in the gaps using the words from the box. Answer the questions.

currents	tool	image	abnormalities
Röntgen	modern	diagnosis	department
hospital	medical	creates	tomography
machines	computers	Ultrasound	electromagnetic
frequency	resonance		

The top 10 medical advances in history

Monique Ellis

Medical imaging (1895)

The first medical imaging 1._____ were X-rays. The X-ray, a form of 2._____ radiation, was ‘accidentally’ invented in 1895 by German physicist Wilhelm Conrad 3._____ when experimenting with electrical 4._____ through glass cathode-ray tubes. The discovery transformed medicine overnight and by the following year, Glasgow 5._____ opened the world’s very first radiology 6._____.

7._____, although originally discovered many years before, began being used for medical 8._____ in 1955. This medical imaging device uses high 9._____ sound waves to create a digital 10._____, and was no less than ground-breaking in terms of detecting pre-natal conditions and other pelvic and abdominal 11._____. In 1967, the computed 12._____ (CT) scanner was created, which uses X-ray detectors and 13._____ to diagnose many different types of disease, and has become a fundamental diagnostic tool in 14._____ medicine.

The next major 15._____ imaging technology was discovered in 1973 when Paul Lauterbur produced the first magnetic 16._____ image (MRI). The nuclear magnetic resonance data 17._____ detailed images within the body and is a crucial 18._____ in detecting life-threatening conditions including tumours, cysts, damage to the brain and spinal cord and some heart and liver problems [5].

What modern diagnostic techniques do you know?

What are they used for?

11. Write an essay on the topic:

Human weaknesses or how to conquer one’s weaker self?

ASSIGNMENT 6 (Chapters 12-13)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *detectible*
- *case-history papers*
- *chest X-ray*
- *admission*
- *treatment*
- *recovery*
- *biopsy*
- *symptoms*
- *irregularity*
- *sedation*
- *incision*
- *periosteum*
- *sensitivity test*
- *specimen*

3. Translate the following phrases:

- ✓ *as soon as the newness wears off*
- ✓ *to be still wet behind the ears*
- ✓ *to set a timing dial*
- ✓ *to take the plunge*
- ✓ *to be getting at*
- ✓ *Johnny-come-lately*
- ✓ *how deplorably sloppy*
- ✓ *on second thought, though*
- ✓ *a hairline case*
- ✓ *a considered estimate*
- ✓ *an essential professional tool*
- ✓ *whited sepulchers*
- ✓ *a procrastinator and incompetent*
- ✓ *a restive time*
- ✓ *verbal joust*

✓ *unselfconsciously*

✓ *rather the revers*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the terms with their definitions.

1. Blood sample	2. Zenker's solution	3. Intestinal flu
4. Mosquito clamps	5. Bacterium	6. Radiologist

a. – a physician specializing in medical radiology.

b. – the clear yellowish fluid that remains from blood plasma after clotting factors (as fibrinogen and prothrombin) have been removed by clot formation.

c. – small, straight or curved forceps used in general surgery that has a locking grip with 3–5 teeth to allow ratchet clamping at various pressures.

d. – a rapid-acting fixative for animal tissues.

e. – an acute usually transitory attack of gastroenteritis that is marked by nausea, vomiting, diarrhea, and abdominal cramping and is typically caused by a virus (as the Norwalk virus) or a bacterium (as *E. coli*).

f. – any of the unicellular prokaryotic microorganisms that commonly multiply by cell division, lack a nucleus or membrane-bound organelles, and possess a cell wall.

6. Find synonyms and antonyms for the terms “sedative” and “sedation”.

7. Find the medical terms which are equivalents for the following abbreviations: ECC, GTT, IM, BP, CA, CAD, C/F, CP, CV, Dx, EC, FT, GA, GH, HA, HTN.

8. Present the literary translation of the passage.

He entered the pathology office to find Pearson hunched over a microscope, a slide folder open in front of him. The older man looked up. “Come and take a look at these. See what you make of them.” He moved away from the microscope, waving Coleman toward it.

“What’s the clinical story?” Coleman slipped the first slide under the retaining clips and adjusted the binocular eyepiece.

“It’s a patient of Lucy Grainger’s. Lucy is one of the surgeons here; you’ll meet her.” Pearson consulted some notes. “The case is a nineteen-year-old girl, Vivian Loburton – one of our own student nurses. Got a lump below her left knee.

Persistent pain. X-rays show some bone irregularity. These slides are from the biopsy.”

There were eight slides, and Coleman studied each in turn. He knew at once why Pearson had asked him for an opinion. This was a hairline case, as difficult as any came. At the end he said, “My opinion is ‘benign.’ ”

“I think it’s malignant,” Pearson said quietly. “Osteogenic sarcoma” [9, c. 162-163].

9. Answer the questions on the text.

- a) What was the Coleman’s first impression of the pathology department?
- b) How did Alexander and Bannister assume Coleman?
- c) What is Mrs. Stranghan? Why has she come to Harry Tomaselly? Why was the problem so urgent?
- d) Why was Coleman that astonished by the absence of the cross file in Three Counties Hospital?
- e) Compare O’Donnell’s dates with Lusy Grainger and Denise. What was different? Why?
- f) Do you appreciate Seddons’ will to marry Vivian? What can await them in future in this case?
- g) What was Coleman’s opinion of Pearson? Why?

10. Read the article. Fill in the gaps using the words from the box. Answer the questions.

penicillin	responsible	recognised	dish
bacteria	millions	resistant	pharmaceutical
antibiotic	development	mass-produced	use

The top 10 medical advances in history

Monique Ellis

Penicillin (1928)

Alexander Fleming’s penicillin, the world’s first 1._____, completely revolutionised the war against deadly 2._____. Famously, the Scottish biologist accidentally discovered the anti-bacterial ‘mould’ in a petri 3._____ in 1928. However, Fleming’s incredible findings were not properly 4._____ until the 1940s, when they began being 5._____ by American drug companies for 6._____ in World War II. Two other scientists were 7._____ for

the mass distribution of 8._____, Australian Howard Florey and Nazi-Germany refugee Ernst Chain, and their 9._____ of the substance ended up saving 10._____ of future lives. Unfortunately, over the years certain bacterium have become increasingly 11._____ to antibiotics, leading to a world-wide crisis that calls for the 12._____ industry to develop new anti-bacterial treatments as soon as possible [5].

In what way can bacteria be helpful?

How can bacteria become resistant to antibiotics?

11. Role play.

Teacher prepares 5 cards with the names of novel characters. Students write 2 questions to each of these 5 characters.

Then one of the students takes the card and impersonifies the chosen character while answering the other students' questions.

Do the same with the other 4 cards.

ASSIGNMENT 7 (Chapters 14-16)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *intestinal flu*
- *bacteria*
- *asphyxiation*
- *lipoma*
- *premature*
- *incubator*
- *uterus*
- *periosteal reaction*
- *discharge*
- *deafness*
- *to sew up*
- *jaundice*
- *scalpel*

3. Translate the following phrases:

- ✓ *a mild concussion*
- ✓ *to catch sight of*
- ✓ *to sell smth short*
- ✓ *to be preordained*
- ✓ *to rap out the words*
- ✓ *as for your own demeanour*
- ✓ *to bear down*
- ✓ *to complement the unreality*
- ✓ *to take for granted*
- ✓ *to through the ball back at*

3. Make up 5 sentences using the above mentioned expressions.

4. Match the terms with their definitions.

- | | | |
|--------------|-----------|---------------|
| 1. Incubator | 2. Lipoma | 3. Premature |
| 4. Incision | 5. Suture | 6. Asphyxiate |

- a. – to kill or make unconscious through inadequate oxygen, presence of noxious agents, or other obstruction to normal breathing.
- b. – a tumor of fatty tissue.
- c. – born after a gestation period of less than 37 weeks.
- d. – an apparatus with a chamber used to provide controlled environmental conditions especially for the cultivation of microorganisms or the care and protection of premature or sick babies.
- e. – a strand or fiber used to sew parts of the living body.
- f. – a cut or wound of body tissue made especially in surgery.

5. Find synonyms for the term “*symptom*”.

6. Present the literary translation of the passage.

Pearson said quietly, “Just a moment, please.” There was silence, the others watching him. He motioned to the policeman’s notebook. “There’ll be a full report for the coroner, but I can tell you the preliminary findings now.” He paused. “The autopsy has shown it was not the car that killed the boy.”

The patrolman looked puzzled. The father said, “But I was there! I tell you . . .”

“I wish there were some other way to tell you this,” Pearson said, “but I’m afraid there isn’t.” He addressed the father. “The blow your boy received knocked him to the road, and there was a mild concussion which rendered him unconscious. He also sustained a small fracture of the nose—quite minor, but unfortunately it caused his nose to bleed profusely.” Pearson turned to the patrolman. “The boy was left lying on his back, I believe—where he fell.”

The officer said, “Yes, sir, that’s right. We didn’t want to move him until the ambulance came.”

“And how long was that?”

“I’d say about ten minutes.”

Pearson nodded slowly. It was more than enough time; five minutes would have been sufficient. He said, “I’m afraid that that was the cause of death. The blood from the nosebleed ran back into the boy’s throat. He was unable to breathe and he aspirated blood into the lungs. He died of asphyxiation.”

The father’s face revealed horror, incredulity. He said, “You mean . . . if we’d only turned him over . . .” [9, c. 185].

7. Answer the questions. Use the lines from the text to prove your opinion.

- a) Why didn’t Pearson like all who were young?

- b) What was the cause of the boy's death? Could he be saved?
- c) Why was Lusy shielding herself from O'Donnell?
- d) Why was the baby that important for the Alexanders?
- e) How were Vivian's feelings towards the results of her biopsy changing?

Why?

8. Discuss the problem of the generation gap between the colleagues. What can it result in? Describe the values and vices.

9. Read and translate the article. Fill in the blanks using the words from the box. Answer the questions.

unless	in (5)	for (2)	if (7)	and (4)	as (3)	on (5)
of (5)	or	over	then	up	through	

Bleeding

If someone has severe bleeding, the main aim is to prevent further loss
 1. _____ blood 2. _____ minimise the effects 3. _____ shock
 (see below).

First, dial 999 4. _____ ask 5. _____ an ambulance
 6. _____ soon 7. _____ possible.

8. _____ you have disposable gloves, then use them to reduce the risk
 9. _____ any infection being passed 10. _____.

Check that there is nothing embedded 11. _____ the wound.
 12. _____ there is, take care not to press down 13. _____ the object.
 Instead, press firmly 14. _____ either side 15. _____ the object
 16. _____ build padding around it before bandaging to avoid putting pressure
 17. _____ the object itself. 18. _____ there is nothing embedded:

Apply and maintain pressure to the wound with your hand, using a clean pad
19. _____ possible.

Use a clean dressing to bandage the wound firmly.

20. _____ the wound is 21. _____ a limb and there are no fractures, raise the limb to decrease the flow 22. _____ blood.

23. _____ bleeding continues 24. _____ the pad 25. _____ apply another pad 26. _____ the top and bandage it 27. _____ place. Do not remove the original pad 28. _____ bandage.

If a body part has been severed, such 29. _____ a finger, do not put it 30. _____ direct contact with ice. Wrap it in a plastic bag or cling film, then wrap it 31. _____ a soft material 32. _____ keep it cool. Once it is wrapped, 33. _____ possible, place the severed body part 34. _____ crushed ice.

Always seek medical help 35. _____ the bleeding 36. _____ it is minor. If someone has a nosebleed that has not stopped after 20 minutes, go to the nearest hospital's accident and emergency (A&E) department [2].

Should everyone know how to provide first aid? Why?

Where and how can one learn the way how to do it?

10. Make up an imaginary situation and act out a dialogue between a doctor and a patient.

ASSIGNMENT 8 (Chapters 17-19)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *a semi-private room*
- *graft*
- *in the upper part of the femur*
- *to cut the flaps*
- *to give one's clearance to proceed*
- *tourniquet*
- *alcoholic zephiran*
- *drowsy from sedation*
- *jaundice*
- *fecal group*

3. Translate the following phrases:

- ✓ *to buoy up somebody's hopes*
- ✓ *a new trend to spaciousness and light*
- ✓ *a doubtful starter*
- ✓ *a tiny fragment of insecure humanity*
- ✓ *matter-of-factly*
- ✓ *an ostensible reason*
- ✓ *coasting leisurely over random thoughts*
- ✓ *to be entrenched like a true diehard*
- ✓ *following the altercation*
- ✓ *to pin down*
- ✓ *lofty ideas*
- ✓ *capital expenditures*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the terms with their definitions.

1. Osteogenic sarcoma	2. Erythroblastosis	3. Periosteal
4. Incision	5. Heart	6. Amputate
7. Indigestion		

a. – situated around or produced external to bone.

- b. – a sarcoma derived from bone or containing bone tissue.
- c. – to remove by or as if by cutting.
- d. – inability to digest or difficulty in digesting something.
- e. – a wound made especially in surgery by incising the body.
- f. – abnormal presence of erythroblasts in the circulating blood.
- g. – a hollow muscular organ of vertebrate animals that by its rhythmic contraction acts as a force pump maintaining the circulation of the blood.

6. Find synonyms and antonyms for the term “*bacteria*”.

7. Answer the questions on the text.

- a) Why has Elizabeth made a decision that John should go to medical school, when she realized the possibility of their child’s death?
- b) What were the chances of the premature baby to stay alive?
- c) What were John’s feelings when he saw his son for the first time?
- d) Did Radiology help to clear the diagnosis on Vivian’s case? What was a verdict? What kind of treatment was to be used?
- e) Why didn’t O’Donnell react to the interested glance of the attractive woman, sitting alone in the Pyramid Lounge?
- f) How did O’Donnell make a proposal? What was the answer? Why?
- g) What was Lucy’s attitude to and opinion of the operating-room jokes? Why? What are yours?
- h) What did Mike Seddons and Vivian had in common with Vivian’s parents?
- i) Was Mike sure in his decision to marry Vivian after he had got to know about her final diagnosis? Why do you think so?
- j) Why did Dr Dornberger put the results of the Alexander baby’s sensitivity report under question? What were the outcomes? How does this case characterize the hospital staff (Dr. Pearson, Dr. Dornberger, Dr. Coleman)? What was wrong with the baby? Why did it happen?
- k) What was the role of the laboratory in the problem with intestinal flu among the hospital staff? How does this situation characterize Pearson?

8. Say whether the statements are true or false. For the false statements give the true information.

- a. Elizabeth and John Alexander had had no children before their premature son was born.
- b. When O'Donnell saw Denise again, he realized that he hadn't missed her at all.
- c. Dr. Pearson hadn't known of the problem with the dish-washer in the hospital canteen until Dr. Coleman told him.
- d. Baby Alexander had difficulties with breathing because it had got a cold.
- e. O'Donnell knew that Denise had children.

9. Present the literary translation of the passages.

“Once more he let his eyes stray back to the tiny figure. For the first time the thought occurred to him: This is my son, my own, a part of my life. Suddenly he was consumed by a sense of overwhelming love for this fragile morsel, fighting his lonely battle inside the warm little box below. He had an absurd impulse to shout through the glass: *You're not alone, son; I've come to help. He wanted to run to the incubator and say: These are my hands; take them for your strength. Here are my lungs; use them and let me breathe for you. Only don't give up, son; don't give up! There's so much ahead, so much we can do together—if only you'll live! Listen to me, and hold on! This is your father and I love you.*” [9, c. 219].

“He said, “Have you ever considered going back—to Burlington, I mean?”

“To live?”

“Yes.”

“You can never go back,” Denise said quietly. “It's one of the few things I've learned. Oh, I don't mean just Burlington, but everything else—time, people, places. You can revisit, or renew acquaintance, but it's never really the same; you're detached; you're passing through; you don't belong because you've moved on.” She paused. “I belong here now. I don't believe I could ever leave New York. Do I sound terribly unrealistic?”

“No,” he said. “You sound terribly wise.”” [9, c. 225].

10. Role play. Make up a dialogue between a lawyer and Dr. Pearson, discussing the Alexander baby's case in court.

11. Read the article. Put the verbs in brackets in the correct form. Answer the questions.

Cases where criminal charges are brought not connected with an investigation by an HPSS employer

There are some criminal offences that, if proven, could 1. _____ (**to render**) a doctor or dentist unsuitable for employment. In all cases, employers, 2. _____ (**to consider**) the facts, 3. _____ (**to need**) to determine whether the employee 4. _____ (**to poses**) a risk to patients or colleagues and whether their conduct warrants instigating an investigation and the exclusion of the practitioner. The employer 5. _____ (**to have**) to give serious consideration to whether the employee can continue in their current duties once criminal charges 6. _____ (**to make**). 7. _____ (**to bear**) in mind the presumption of innocence, the employer must consider whether the offence, if proven, is one that 8. _____ (**to make**) the doctor or dentist unsuitable for their type of work and whether, pending the trial, the employee can continue in their present duties, should be 9. _____ (**to allocate**) to other duties or should be excluded from work. This will depend on the nature of the offence and advice should be sought from an HR or legal adviser. Employers should, as a matter of good practice, 10. _____ (**to explain**) the reasons for taking such action [12].

Considering the information in the article, what do you think will happen with Dr. Pearson if the Alexander baby has got erythroblastosis?

12. Write an essay on the topic:

“What if?” – a question which we often ask. But do we get the answer?

ASSIGNMENT 9 (Chapters 20-22)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *umbilical vein*
- *a flushing-out process*
- *a term baby*
- *a breakdown in hygiene precautions*
- *a means of contamination*
- *case-history reporting*
- *outpatients' department*
- *culture plate*
- *a petri dish*
- *a tube of sterile saline*
- *fluctuation of the venous pressure*
- *dizziness*
- *stool specimens*
- *stump of the thigh*
- *localized pain*
- *inevitable soreness*

3. Translate the following phrases:

- ✓ *by exercise of skill and judgement*
- ✓ *neither dramatized nor held anything back*
- ✓ *how mentally involved he had become*
- ✓ *for the sake of*
- ✓ *half-hearted attempts*
- ✓ *two hands overlapped*
- ✓ *dereliction had ended out skill*
- ✓ *banished the moods*
- ✓ *a hazard of our existence*
- ✓ *to keep a sense of proportion*
- ✓ *celerity and thoroughness*
- ✓ *like an avenging sword*
- ✓ *a sense of complacency*

- ✓ *diligent searching*
- ✓ *to show somebody off*
- ✓ *for good and all*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the terms with their definitions.

1. Shock	2. Donor	3. Oxygen	4. Artificial respiration
5. Anaemia	6. Pulse	7. Clinician	

a. – a condition in which the blood is deficient in red blood cells, in hemoglobin, or in total volume.

b. – the rhythmic forcing of air into and out of the lungs of a person whose breathing has stopped.

c. – a state of profound depression of the vital processes associated with reduced blood volume and pressure and caused usually by severe especially crushing injuries, hemorrhage, or burns.

d. – one used as a source of biological material (such as blood or an organ).

e. – the regular expansion of an artery caused by the ejection of blood into the arterial system by the contractions of the heart.

f. – a chemical element that constitutes 21 percent of the Earth's atmosphere, that is capable of combining with all elements except some noble gases, that is active in physiological processes of almost all known organisms, and that is involved especially in combustion.

g. – a person qualified in the clinical practice of medicine, psychiatry, or psychology as distinguished from one specializing in laboratory or research techniques or in theory.

6. Explain the meaning of the word combinations. Use them in context.

- *blood exchange*
- *respiration is failing*
- *donor blood*
- *typhoid shots*
- *typhoid carrier*
- *typhoid gems*

7. Find synonyms and antonyms for the term “epidemics”.

8. Answer the questions on the text.

- a) Why couldn't Dr. Dornberger perform an exchange transfusion for the Alexander baby?
- b) Do you agree with Dr. Dornberger's opinion that old doctors should know when to give way to the young?
- c) How was the procedure of exchange transfusion for the Alexander baby proceeding?
- d) Did Dr. Coleman take satisfaction from the fact that he had been right and Dr. Pearson wrong about the blood test? Why?
- e) What did the Alexander baby's death mean for each of the characters involved?
- f) Why did the author let the baby die? What would be different if it stayed alive?
- g) What was the emergency meeting summoned for?
- h) Why did Vivian ask Mike not to come to her for seven days? Do you understand her motives? Will it do any good? Why do you think so?
- i) 'Accuser' and 'accused': how do these antonyms characterize Dr. Pearson's condition in the emergency meeting?
- j) What conclusions has O'Donnell made at the end of a busy day at Three Counties marked by Pearson's firing, Charlie Dornberger's retirement, the discovery that an elementary hygiene precaution had been neglected in the hospital for more than six months and the occurrence of typhoid?
- k) Can O'Donnell and Denise be together? What did their telephone conversation suggest? Why?

9. Say whether the statements are true or false. For the false statements give the true information.

- a. Dr. Pearson was not anxious of the blood transfusion for the Alexander baby.
- b. O'Donnell put his job in the first place.
- c. There were ten definite cases of typhoid and four suspected.
- d. The Alexander baby died because of the shock.
- e. Dr. Pearson stays in his position by the time the epidemics is over.

10. Present the literary translation of the passage.

Kent O'Donnell was sweating, and the assisting nurse leaned forward to mop his forehead. Five minutes had passed since artificial respiration had begun, and still there was no response from the tiny body under his hands. His thumbs were on the chest cavity, the remainder of his fingers crossed around the back. The child was so small, O'Donnell's two hands overlapped; he had to use them carefully, aware that with too much pressure the fragile bones would sunder like twigs. Gently, once more, he squeezed and relaxed, the oxygen hissing, trying to induce breath, to coax the tired, tiny lungs back into life with movement of their own.

O'Donnell wanted this baby to live. He knew, if it died, it would mean that Three Counties – his hospital – had failed abjectly in its most basic function: to give proper care to the sick and the weak. This child had not had proper care; it had been given the poorest when it needed the best, and dereliction had edged out skill. He found himself trying to communicate, to transmit his own burning fervor through his finger tips to the faltering heart lying beneath them. You needed us and we failed you; you probed our weakness and you found us wanting. But please let us try – again, together. Sometimes we do better than this; don't judge us for always by just one failure. There's ignorance and folly in this world, and prejudice and blindness – we've shown you that already. But there are other things, too; good, warm things to live for. So breathe! It's such a simple thing, but so important. O'Donnell's hands moved back and forth . . . compressing . . . releasing . . . compressing . . . releasing . . . compressing . . . [9, c. 257-258].

11. Role play. Make up a dialogue between Dr. Pearson and his conscience, discussing his past, present and future.

12. Read the article. Put the verbs in brackets in the correct form. Answer the questions.

Why is laughter the sweetest medicine for the mind and body?

Laughter 1. _____ (**to be**) a powerful antidote to stress, pain, and conflict. Nothing 2. _____ (**to work**) faster or more dependably 3. _____ (**to bring**) your mind and body back into balance than a good laugh. Humor 4. _____ (**to lighten**) your burdens, 5. _____ (**to inspire**) hope, 6. _____ (**to connect**) you to others, and 7. _____ (**to keep**) you

grounded, focused, and alert. It also 8. _____ (**to help**) you 9. _____ (**to release**) anger and forgive sooner.

With so much power to heal and renew, the ability to laugh easily and frequently 10. _____ (**to be**) a tremendous resource for surmounting problems, 11. _____ (**to enhance**) your relationships, and 12. _____ (**to support**) both physical and emotional health. Best of all, this priceless medicine is fun, free, and easy to use.

Laughter 13. _____ (**to be**) good for your health

Laughter relaxes the whole body. A good, hearty laugh 14. _____ (**to relieve**) physical tension and stress, 15. _____ (**to leave**) your muscles relaxed for up to 45 minutes after.

Laughter boosts the immune system. Laughter 16. _____ (**to decrease**) stress hormones and 17. _____ (**to increase**) immune cells and infection-fighting antibodies, thus 18. _____ (**to improve**) your resistance to disease.

Laughter triggers the release of endorphins, the body's natural feel-good chemicals. Endorphins 19. _____ (**to promote**) an overall sense of well-being and can even temporarily 20. _____ (**to relieve**) pain.

Laughter protects the heart. Laughter 21. _____ (**to improve**) the function of blood vessels and 22. _____ (**to increase**) blood flow, which can help protect you against a heart attack and other cardiovascular problems.

Laughter burns calories. OK, so it's no replacement for going to the gym, but one study found that laughing for 10 to 15 minutes a day can burn approximately 40 calories – which could be enough to lose three or four pounds over the course of a year.

Laughter lightens anger's heavy load. Nothing 23. _____ (**to diffuse**) anger and conflict faster than a shared laugh. Looking at the funny side can put problems into perspective and 24. _____ (**to enable**) you to move on from confrontations without holding onto bitterness or resentment.

Laughter may even help you to live longer. A study in Norway 25. _____ (**to find**) that people with a strong sense of humor outlived those who don't laugh as much. The difference was particularly notable for those battling cancer [16].

Why do doctors make jokes at work? What effect does it have?

13. Write an essay on the topic:

Job vs personal life. What to put in the first place?

ASSIGNMENT 10 (Chapters 23-24)

1. Give the short summary of the passage under study.

2. Study the active vocabulary:

- *the emergency influx*
- *virile*
- *unimpaired*
- *thyroid cancer*
- *administrator*
- *health officer*
- *malaise*
- *frozen section*
- *artificial limb*
- *autopsy-room annex*
- *ledge*
- *the city health authorities*

3. Translate the following phrases:

- ✓ *outside catering*
- ✓ *to proceed on the assumption that*
- ✓ *the outward signs of personal neglect*
- ✓ *to grind to a halt*
- ✓ *impending disruption*
- ✓ *one can't take that chance*
- ✓ *bogged down by outdated concepts*
- ✓ *handicapped by antiquated methods*
- ✓ *to probe the inner chasms of one's soul and conscience*
- ✓ *to make pathology count*
- ✓ *to vegetate and get into a rut*
- ✓ *full of spice and vinegar*
- ✓ *emotion-charged*
- ✓ *the voice faltered*
- ✓ *to hold off*
- ✓ *to close down*
- ✓ *to snatch a few hours of sleep*

✓ *rumpled clothes*

✓ *wild hair*

4. Make up 5 sentences using the above mentioned expressions.

5. Match the medical terms with their abbreviations.

1. ADM	a. infectious diseases
2. A&W	b. alive and well
3. DO	c. date of birth
4. DOB	d. preoperative (before surgery)
5. ER	e. inpatient
6. H&P	f. emergency room
7. HR	g. history and physical examination
8. ICU	h. red blood cell
9. ID	i. disorder
10. IP	j. postoperative (after surgery)
11. OPD	k. intensive care unit
12. P	l. outpatient department
13. Post-op	m. pulse
14. Pre-op	n. heart rate
15. RBC	o. admission

6. Work in small groups. Think of the metaphor to characterize the relationships between a doctor, a patient and medicine. Represent it in the drawing.

7. Answer the questions on the text.

a) Why was kitchen that important for the hospital? What would be the consequences of its closing?

b) Who has found the typhoid carrier? Has this discovery save the hospital?

c) What was Vivian's opinion of the separation with Mike after five days had passed?

d) What was Dr. Coleman's idea of Dr. Pearson? Why? Was it permanent?

e) What was the reason of O'Donnell's visit to Eustace Swayne? What was the purpose of the Joseph Pearson Medical Endowment?

f) What decision has Mike made on their relations with Vivian? Why? Was he proud of it?

g) What feelings did Coleman meet when he was offered to take the post of a director of pathology? Why? What was Dr. Pearson's role in it?

h) What kind of relationship is waiting for Lucy Grainger and Kent O'Donnell in future? Why do you think so?

i) What advice did Dr. Pearson give to Dr. Coleman when he was resigning the hospital for good? In what way has it characterized the old doctor?

8. Say whether the statements are true or false. For the false statements give the true information.

a. The board hasn't approved the expenditures for the dishwashers.

b. Vivian didn't love Mike any more, that is why she told him not to come.

c. The hospital was closed, because they didn't find the typhoid carrier.

d. Eustace Swayne told O'Donnell to restore Dr. Pearson at his post of the Head of Pathology.

e. Vivian Loburton didn't have osteogenic sarcoma.

9. Present the literary translation of the passage.

David Coleman considered. It was true there were things he believed, but even to himself he had seldom expressed them. Now, perhaps, was a time for definition.

"I suppose the real thing," he said slowly, "is that all of us – physicians, the hospital, medical technology – exist only for one thing: for patients, for healing of the sick. I believe we forget this sometimes. I think we become absorbed in medicine, science, better hospitals; and we forget that all these things have only one reason for existence – people. People who need us, who come to medicine for help." He stopped. "I've put it clumsily."

"No," O'Donnell said. "You've put it very well." He had a sense of triumph and of hope. Instinct had not belied him; he had chosen well. He foresaw that the two of them – as chief of surgery and director of pathology – would be good together. They would go on and build and, with them, Three Counties would progress. Not all that they wrought would be perfect; it never was. There would be flaws and failures, but at least their aims were the same, their feelings shared. They would have to remain close; Coleman was younger than himself, and there were areas in which O'Donnell's greater experience could be of help. In these past few weeks the chief of surgery himself had learned a good deal. He had learned that zeal could lead to complacency as surely as indifference, and that disaster could be reached by many

routes. But from now on he would fight complacency on every front, and Pathology, with young Dr. Coleman at its head, could be a stout right arm.

A thought occurred to him. He asked, “One more thing. How do you feel about Joe Pearson and the way he’s leaving?”

“I’m not sure,” David Coleman said. “I’ve been wishing I knew.”

“It’s not such a bad thing to be unsure sometimes. It takes us away from rigid thinking.” O’Donnell smiled. “There are some things I think you should know though. I’ve been talking with some of the older men on staff; they’ve told me incidents, things I didn’t know about.” He paused. “Joe Pearson has done a great deal for this hospital in thirty-two years – things that are mostly forgotten now or that people like you and me don’t always get to hear about. He started the blood bank, you know. It’s strange to think of it, but there was a lot of opposition at the time. Then he worked for the formation of a tissue committee; I’m told a good many staff men fought him bitterly on that. But he got the committee and it did a lot to raise the standard of surgery here. Joe did some investigative work, too – on the cause and incidence of thyroid cancer. Most of it’s generally accepted now, but few people remember that it came from Joe Pearson.”

“I didn’t know,” Coleman said. “Thank you for telling me.”

“Well, these things get forgotten. Joe brought a lot of new things into the lab, too – new tests, new equipment. Unfortunately there came a time when he didn’t do new things any more. He let himself vegetate and get in a rut. It happens sometimes.”

Suddenly Coleman thought of his own father, his strong suspicion that the sensitized blood which killed the Alexanders’ child had stemmed from a transfusion his father had given years before – given without Rh typing, even though the dangers were already known to medicine.

“Yes,” he said. “I suppose it does” [9, c. 306-307].

10. Make up and act out a dialogue between Dr. Coleman and his successor in thirty years.

11. Read the article. Fill in the gaps using the words from the box. Answer the questions.

<i>Removal</i>	population	circulation	infectious
infectious	<i>Infective</i>	characterized	epidemic
<i>Susceptible</i>	transitions	members	

An Epidemic Process in an Open Population

William Goffman

Abstract

IN general an 1._____ process can be 2._____ as a time-dependent process of transition by the members of a 3._____. The state 4._____ are caused by exposure to some influence called 5._____ material. The 6._____ of the population can belong to one of three basic states at a given point in time: (a) 7._____, those members of the population who are host to the infectious material; (b) 8._____, those members of the population who can become infectives given effective contact with 9._____ material; (c) 10._____, those members of the population who have been removed from 11._____ for one of a variety of reasons such as death, immunity, hospitalization, etc. [6].

What is epidemic process according to the article abstract?

What should be done in case of epidemic? Why?

Why were the actions of the Three Counties hospital staff effective?

12. Write an essay on the topic:

Doctors have no right to make mistakes, have they?

APPENDIX 1. ROLE PLAY PROJECTS

PROJECT 1. Work in small groups. Act out a trial session on the doctor. Witnesses, defense and prosecution are involved.

PROJECT 2. Prepare a conference devoted to the latest developments in the medical field, their importance and necessity.

PROJECT 3. Work in small groups. Think of some invention in the medical field (a hypothetical one) which can still be made. Prepare a medical seminar with the presentations of the inventions, their discussions and awarding of the best ones.

APPENDIX 2. GAMES WITH STUDENTS

GAME 1. *Who am I?*

Who Am I? is a guessing game where students use yes or no questions to guess the identity of a character from the novel. Questions are based upon the traits and characteristics of a character everyone will be able to identify.

Everyone receives a sticky note or note card with the name of a character. The name is placed on either the person's forehead or upper back with a piece of masking tape. Players circulate and ask yes or no questions until everyone has identified the name on their own sticky note or card.

Teacher can also put a time limit or number of questions limit.

Players are encouraged to move throughout the room, mingling and asking each other questions. Once a player guesses his/her character's identity correctly, he/she can continue to play answering the questions of other players, or teacher can decide he/she needs to wait in an area away from the other players.

Teacher: *"Each person tries to figure out which novel character they are by only asking "Yes" or "No" questions to gain clues about the name that is on their back or forehead"* [15].

GAME 2. DIAGNOSE A DISEASE BY ITS SYMPTOMS.

Students write on separate pieces of paper the symptoms of a disease (symptoms of one disease on one piece of paper) and put them into a bag. Then one student pulls out a piece of paper and tries to put the diagnosis. He is corrected if he fails.

REFERENCES AND FURTHER READING

1. Abbreviations. Your Dictionary. URL: <https://abbreviations.yourdictionary.com/articles/medical-abrev.html/> (Last accessed: 14.05.2019).
2. Bleeding. NHS. URL: <http://www.nhs.uk/conditions/Accidents-and-first-aid/Pages/Introduction.aspx/> (Last accessed: 14.05.2019).
3. Boseley S. Health workers warned against dating former patients / Sarah Boseley (health editor). URL: <https://www.theguardian.com/society/2007/apr/11/health.medicineandhealth3/> (Last accessed: 14.05.2019).
4. Bryden D., Storey I. Duty of care and medical negligence / Daniele Bryden, Ian Storey // *Continuing Education in Anaesthesia Critical Care & Pain*, Volume 11, Issue 4, 2011, P. 124-127. URL: <http://ceaccp.oxfordjournals.org/content/11/4/124.full/> (Last accessed: 14.05.2019).
5. Ellis M. The top 10 medical advances in history / Monique Ellis. URL: <https://www.proclinical.com/blogs/2017-11/the-top-10-medical-advances-in-history/> (Last accessed: 14.05.2019).
6. Goffman W. An Epidemic Process in an Open Population / William Goffman. *Nature* volume 205, P. 831–832, 1965. URL: <https://www.nature.com/articles/205831a0/> (Last accessed: 14.05.2019).
7. Hailey A. Biography. URL: <https://biography.jrank.org/pages/4390/Hailey-Arthur.html/> (Last accessed: 14.05.2019).
8. Hailey A. Biography. URL: <https://www.imdb.com/name/nm0354150/bio/> (Last accessed: 14.05.2019).
9. Hailey A. *The Final Diagnosis* / Arthur Hailey. – М. : Айрис-пресс, 2006. – 352 с.
10. Jeffries L., McIntyre D. *Stylistics*. – Cambridge University Press, 2010.
11. Leech G. *Style in Fiction: A Linguistic Introduction to English Fictional Prose* / Geoffrey Leech, Michael H. Short. – London: Longman, 1981.
12. *Maintaining High Professional Standards in the Modern HPSS (A framework for the handling of concerns about doctors and dentists in the HPSS)* Department of Health, Social Services & Public Safety, 2005. – 44 p. URL: http://www.belfasttrust.hscni.net/pdf/BHSCT_Maintaining_High_Professional_Standards.pdf/ (Last accessed: 14.05.2019).
13. Merriam-Webster Medical Dictionary: Medline Plus. – A service of the U.S. National Library of Medicine National Institutes of Health. – URL: <http://www.merriam-webster.com/medlineplus/medicine/> (Last accessed: 14.05.2019).
14. Substance Abuse and Mental Health Services Administration (US) Treatment Improvement Protocol (TIP) Series, No. 6. – Center for Substance Abuse Treatment. – Rockville (MD), 1993. URL: <http://www.ncbi.nlm.nih.gov/books/NBK64717/> (Last accessed: 14.05.2019).

15. Who am I? Game. URL: <https://icebreakerideas.com/who-am-i-game/>
(Last accessed: 14.05.2019).
16. Why is laughter the sweetest medicine for the mind and body?[
Lawrence Robinson, Melinda Smith, Jeanne Segal]. URL:
<https://www.helpguide.org/articles/mental-health/laughter-is-the-best-medicine.htm/>
(Last accessed: 14.05.2019).
17. Wikipedia. – The Free Encyclopedia. URL: <http://en.wikipedia.org/>
(Last accessed: 14.05.2019).
18. <http://dictionary.reference.com>.
19. <http://search.medicinenet.com>.
20. <http://www.medterms.com>.
21. <https://www.medilexicon.com/dictionary>.

Наукове видання

САБАДАШ Д. В.

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