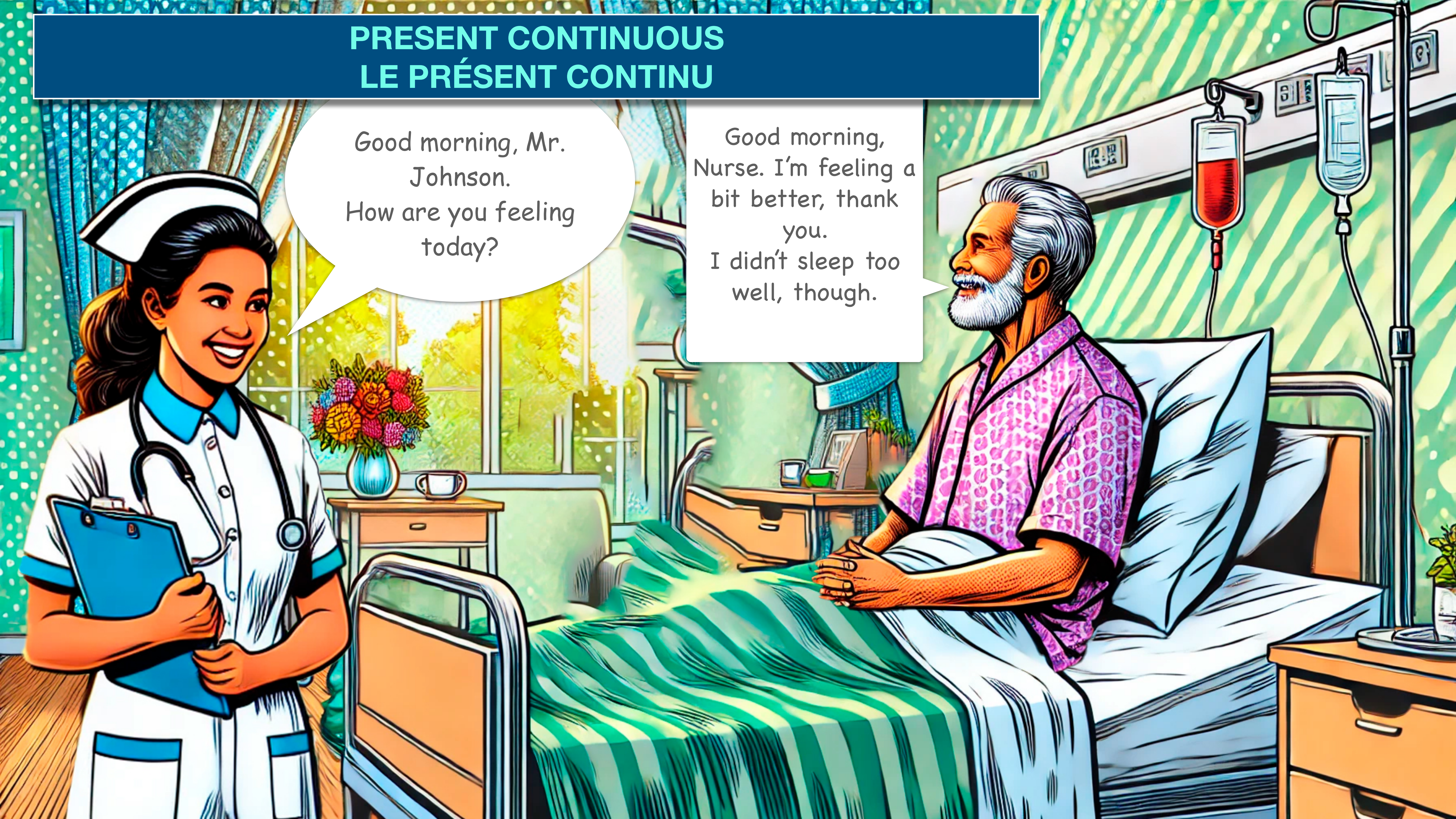


PRESENT CONTINUOUS LE PRÉSENT CONTINU

Good morning, Mr. Johnson.
How are you feeling today?

Good morning, Nurse. I'm feeling a bit better, thank you.
I didn't sleep too well, though.



PRESENT CONTINUOUS LE PRÉSENT CONTINU

Good morning, Mr. Johnson.
How are you feeling today?

Good morning, Nurse. I'm feeling a bit better, thank you.
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Be + verbe _ing
(sujet) **AM + FEEL_ING**

To feel : Verbe, ici dans sa forme « Continuous »
La forme continue (ou progressive) se construit avec

Be + verbe _ing
ARE (sujet) + **FEEL_ING**

La forme « Continuous » indique une action en cours



PRESENT CONTINUOUS LE PRÉSENT CONTINUU

Good morning, Mr.
Johnson.
**How are you feeling
today?**

Good morning,
Nurse. **I'm feeling
a bit better**, thank
you

Inversion sujet question/réponse :

En anglais, l'inversion sujet-verbe est une façon de structurer les phrases interrogatives (questions). Au lieu de l'ordre habituel sujet-verbe, on inverse l'ordre pour mettre un auxiliaire ou un modal en premier, suivi du sujet, puis du verbe principal. À retenir, dans les questions, l'auxiliaire est placé avant le sujet.

Exemple simple :

Question : « How are you feeling today? » (Complément (adverbe interrogatif) - Auxiliaire - Sujet - Verbe - Complément (adverbe de temps))

Phrase affirmative : « I am feeling a bit better. » (Sujet - Auxiliaire - Verbe - Complément)




Exercise

Complete the sentences using the present continuous form of the verbs in parentheses:

- The nurse _____ (check) Mr. Johnson's vitals.
- Mr. Johnson _____ (experience) some pain in his back.
- The nurse _____ (try) to help Mr. Johnson manage his pain.
- Mr. Johnson _____ (not eat) much this morning.
- The nurse _____ (make) a note of Mr. Johnson's condition.
- Mr. Johnson _____ (wait) for the nurse to bring his pain medication.
- The nurse _____ (assure) Mr. Johnson that she will be back to check on

FEELINGS & EMOTIONS RESSENTIS ET ÉMOTIONS

A colorful illustration of a hospital room. A female nurse with dark hair, wearing a white uniform and a nurse's cap, stands smiling and holding a blue clipboard. She is talking to an elderly male patient with white hair and a beard, who is sitting up in a hospital bed. The patient is wearing a purple patterned hospital gown. The room features a window with blue curtains, a bedside table with a cup, and an IV stand with two bags of fluid hanging from it. The overall style is that of a comic book or a vibrant illustration.

I'm sorry to hear that.
Can you tell me more about what kept
you up?

I think it was the
pain in my back.
It wasn't too bad,
but it was just
enough to keep me
from getting
comfortable.

FEELINGS & EMOTIONS RESSENTIS ET ÉMOTIONS

I'm **sorry** to hear that.
Can you **tell me more** about what
kept you up?

L'expression du ressenti par
l'infirmière :
Je suis désolée d'entendre cela.
Pouvez-vous m'en dire plus sur ce qui
vous a tenu éveillé ?

I think it was the
pain in my back.
It wasn't too bad,
but it was **just**
enough to keep me
from getting
comfortable.

L'expression du ressenti par
le patient :
Je pense que c'était la
douleur dans mon dos.
Ce n'était pas trop grave,
mais c'était juste assez pour
m'empêcher de me mettre à
l'aise.



FEELINGS & EMOTIONS RESSENTIS ET ÉMOTIONS

Analyse des ressentis et émotions exprimés dans les phrases :

- "I'm sorry to hear that." :
 - Cette phrase exprime de l'empathie et de la compassion envers la personne qui a partagé une expérience négative.
- "Can you tell me more about what kept you up?" :
 - Cette question montre de l'intérêt et une volonté d'aider en comprenant mieux la situation.
- "I think it was the pain in my back." :
 - Cette phrase exprime une frustration et une gêne physique due à la douleur.
- "It wasn't too bad, but it was just enough to keep me from getting comfortable." :
 - Cette phrase décrit une sensation désagréable qui a perturbé le confort et le sommeil, tout en minimisant légèrement l'intensité de la douleur.

En résumé, les phrases expriment principalement :

Empathie et soutien de la part de l'infirmière qui écoute.

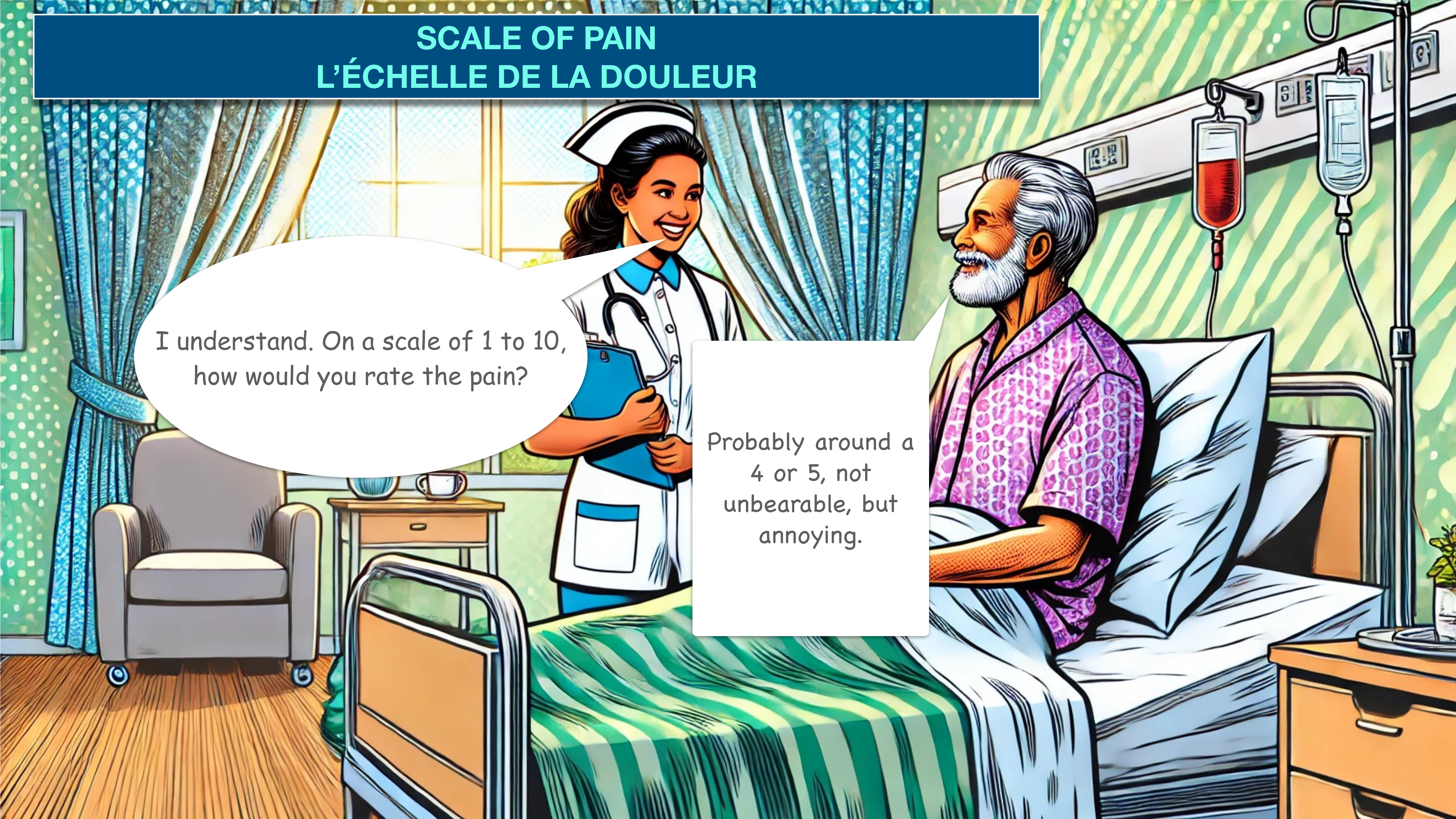
Douleur et inconfort de la part du patient qui partage son expérience.

Minimisation de la douleur, peut-être pour ne pas inquiéter l'infirmière ou pour paraître plus fort.

Il est important de noter que ces émotions sont exprimées de manière assez subtile et implicite et reposent sur la compréhension du contexte et des nuances du langage.



SCALE OF PAIN L'ÉCHELLE DE LA DOULEUR



I understand. On a scale of 1 to 10, how would you rate the pain?

Probably around a 4 or 5, not unbearable, but annoying.

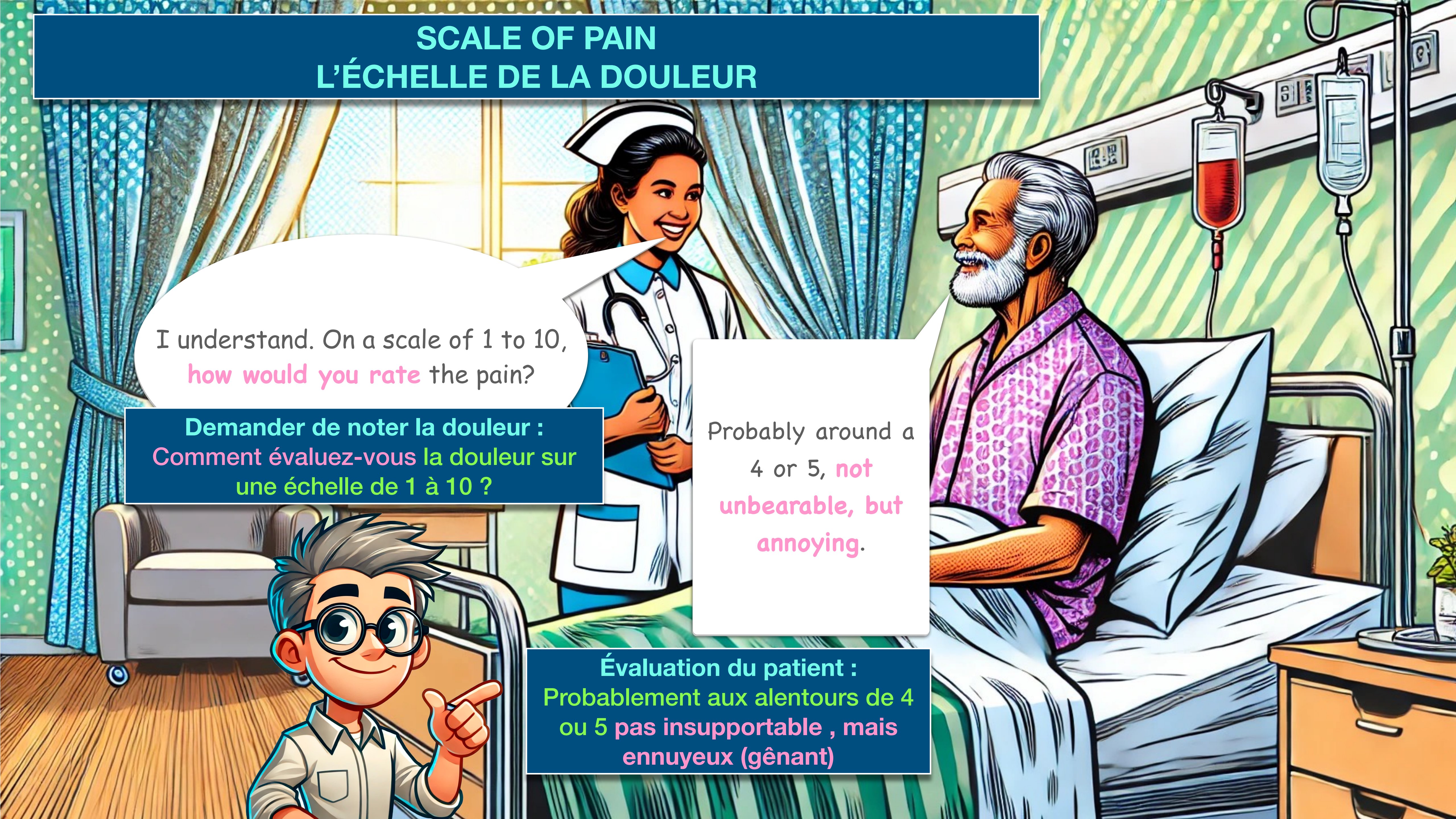
SCALE OF PAIN L'ÉCHELLE DE LA DOULEUR

I understand. On a scale of 1 to 10,
how would you rate the pain?

Demander de noter la douleur :
Comment évaluez-vous la douleur sur
une échelle de 1 à 10 ?

Probably around a
4 or 5, **not**
unbearable, but
annoying.

Évaluation du patient :
Probablement aux alentours de 4
ou 5 pas insupportable , mais
ennuyeux (gênant)



SCALE OF PAIN L'ÉCHELLE DE LA DOULEUR

I understand. On a scale of 1 to 10, how would you rate the pain?

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0-10 SCALE OF PAIN SEVERITY

	SEVERITY	DESCRIPTION OF EXPERIENCE
	10 UNABLE TO MOVE	I am in bed and can't move due to my pain. I need someone to take me to the emergency room to get help for my pain.
	9 SEVERE	My pain is all that I can think about. I can barely talk or move because of the pain.
	8 INTENSE	My pain is so severe that it is hard to think of anything else. Talking and listening are difficult.
	7 UNMANAGEABLE	I am in pain all the time. It keeps me from doing most activities.
	6 DISTRESSING	I think about my pain all of the time. I give up many activities because of my pain.
	5 DISTRACTING	I think about my pain most of the time. I cannot do some of the activities I need to do each day because of the pain.
	4 MODERATE	I am constantly aware of my pain but I can continue most activities.
	3 UNCOMFORTABLE	My pain bothers me, but I can ignore it most of the time.
	2 MILD	I have a low level of pain. I am aware of my pain only when I pay attention to it.
	1 MINIMAL	My pain is hardly noticeable.
	0 NO PAIN	I have no pain.

SCALE OF PAIN L'ÉCHELLE DE LA DOULEUR

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Exercise

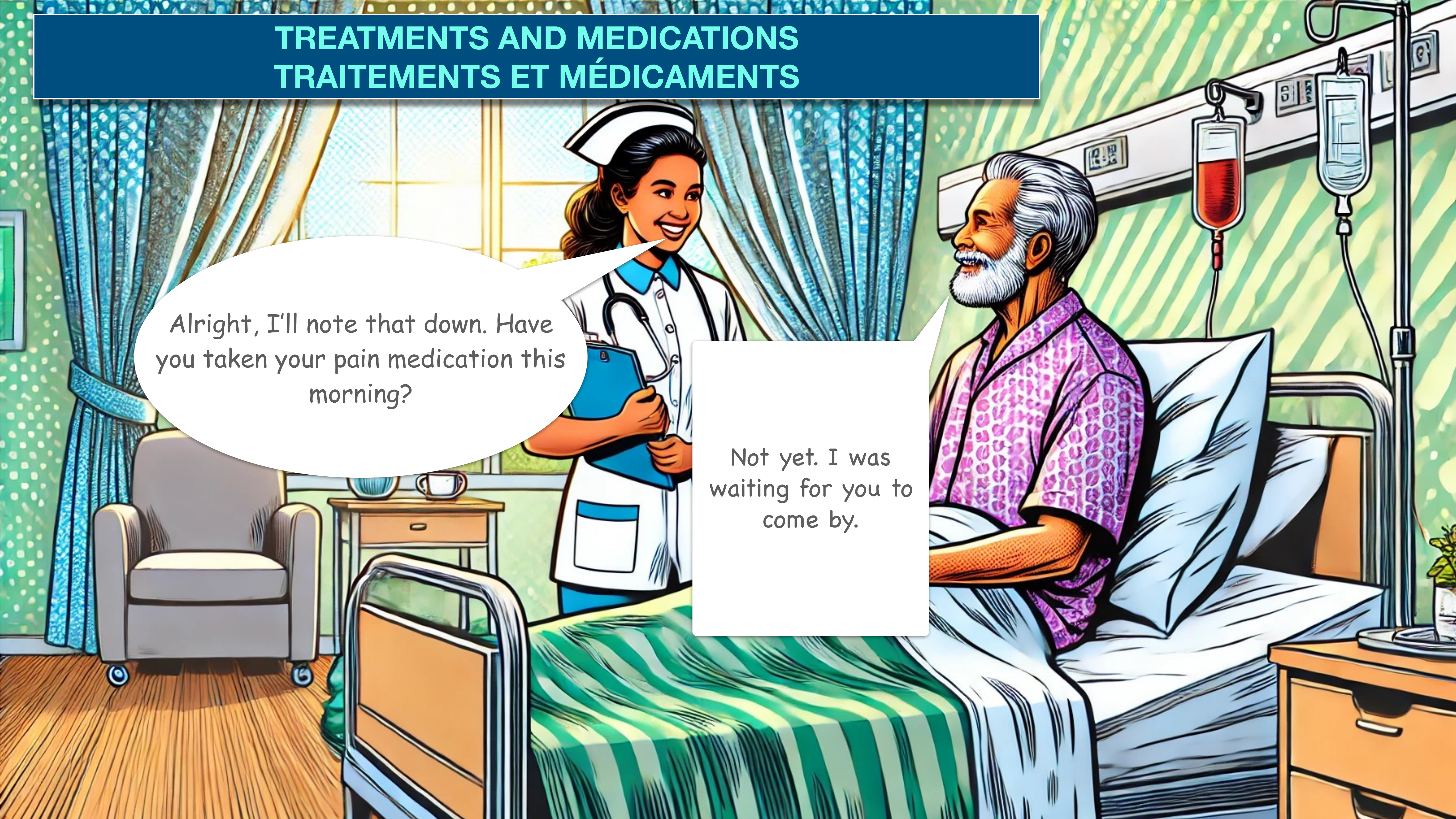
Rate the pain

- A small cut on your finger.
- A mild headache.
- A stomachache after eating too much.
- A pain in your leg after running.
- A strong migraine.

0-10 SCALE OF PAIN SEVERITY

	SEVERITY	DESCRIPTION OF EXPERIENCE
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TREATMENTS AND MEDICATIONS TRAITEMENTS ET MÉDICAMENTS

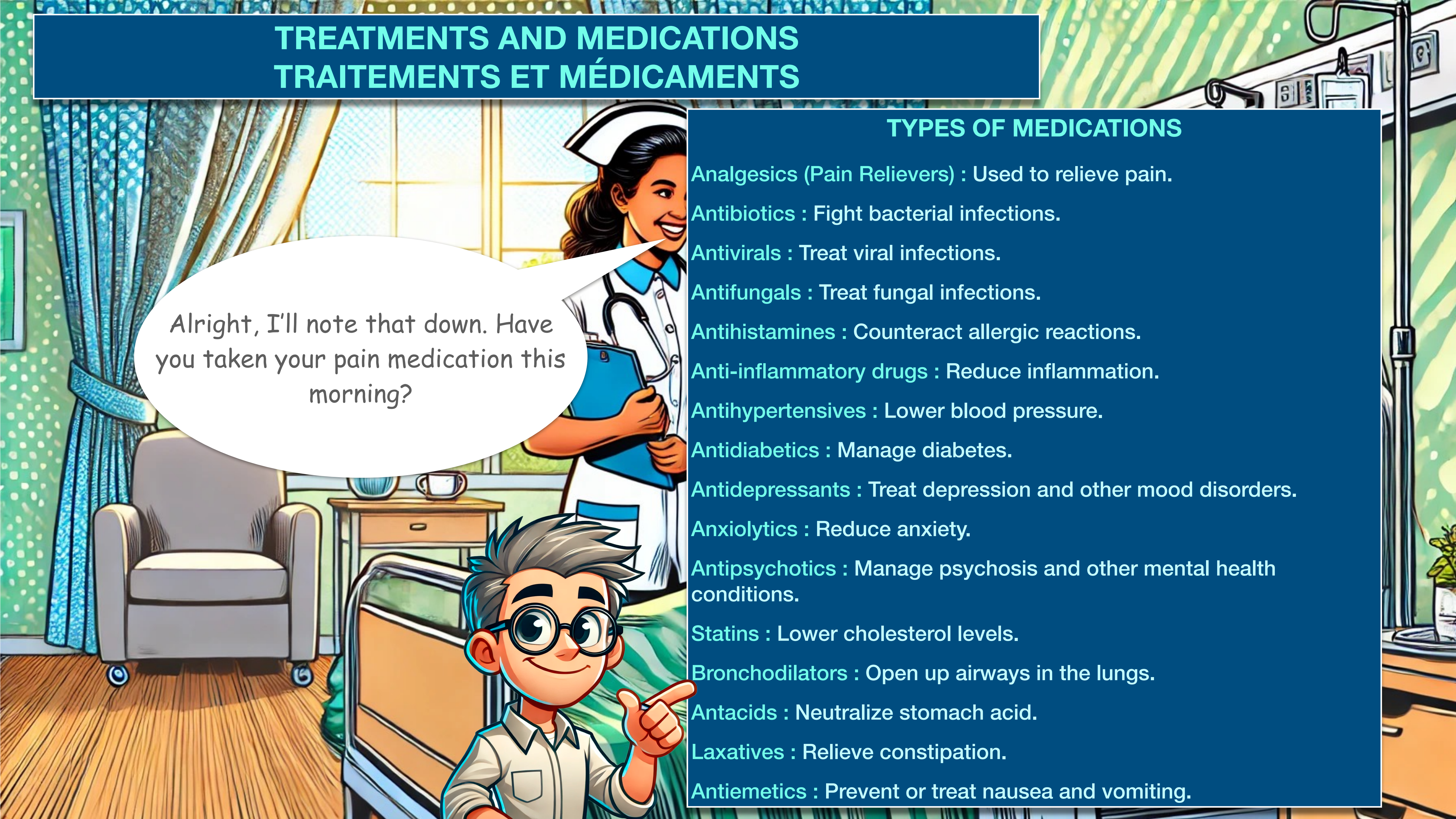


Alright, I'll note that down. Have you taken your pain medication this morning?

Not yet. I was waiting for you to come by.

TREATMENTS AND MEDICATIONS

TRAITEMENTS ET MÉDICAMENTS



Alright, I'll note that down. Have you taken your pain medication this morning?

TYPES OF MEDICATIONS

- Analgesics (Pain Relievers) : Used to relieve pain.
- Antibiotics : Fight bacterial infections.
- Antivirals : Treat viral infections.
- Antifungals : Treat fungal infections.
- Antihistamines : Counteract allergic reactions.
- Anti-inflammatory drugs : Reduce inflammation.
- Antihypertensives : Lower blood pressure.
- Antidiabetics : Manage diabetes.
- Antidepressants : Treat depression and other mood disorders.
- Anxiolytics : Reduce anxiety.
- Antipsychotics : Manage psychosis and other mental health conditions.
- Statins : Lower cholesterol levels.
- Bronchodilators : Open up airways in the lungs.
- Antacids : Neutralize stomach acid.
- Laxatives : Relieve constipation.
- Antiemetics : Prevent or treat nausea and vomiting.

Exercise

Match the medication to the condition

Antibiotics

Laxatives

Antihistamines

Analgesics

Anti-inflammatory drugs

Antidiabetics

Antidepressants

Anxiolytics

Antacids

Antihypertensives

Reduce anxiety

Relieve pain

Treat depression

Reduce inflammation

Fight bacterial infections

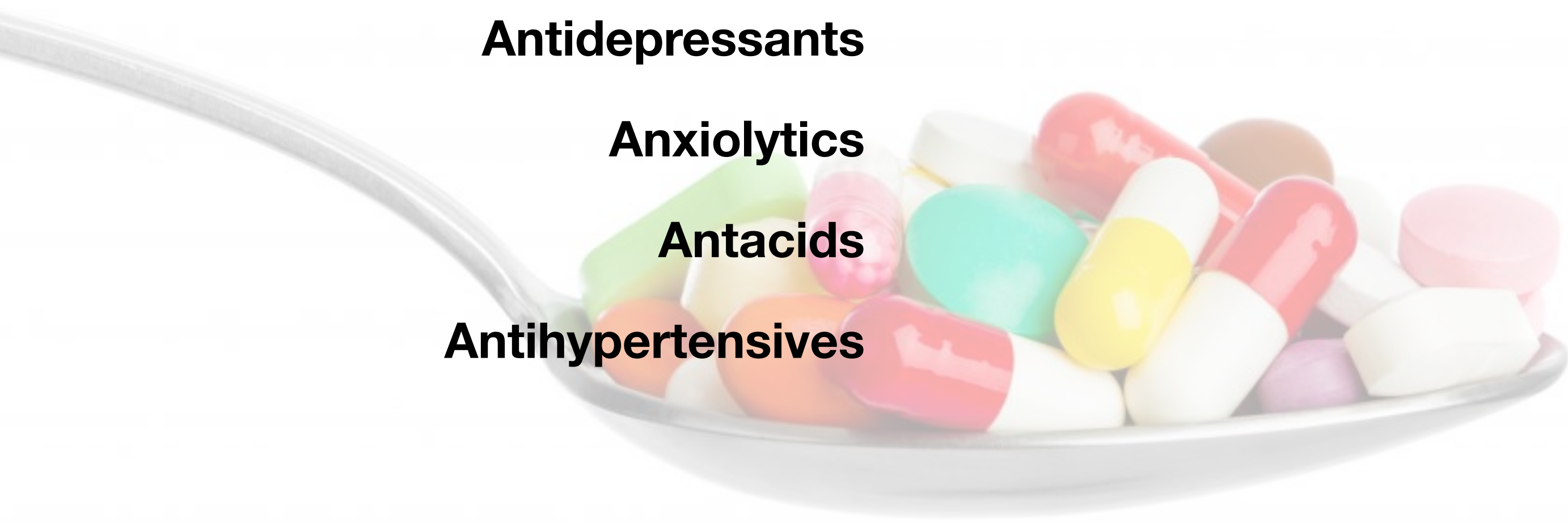
Lower blood pressure

Neutralize stomach acid


Manage diabetes

Combat allergies

Relieve constipation



CHECKING THE VITALS VÉRIFICATION DES CONSTANTES



Let me get that for you now.
I'll also check your vitals and see if there's
anything else we can do to help with the pain.
Maybe adjusting your position in bed might
help as well.

Thank you, I
appreciate that.

CHECKING THE VITALS VÉRIFICATION DES CONSTANTES



THE MAIN VITALS A NURSE CHECKS

Temperature: To assess for fever or hypothermia, which could indicate infection or other underlying health issues.

Pulse: To measure heart rate and rhythm, which can provide insights into cardiovascular health.

Respiratory rate: To count breaths per minute, which can reveal respiratory distress or other breathing problems.

Blood pressure: To measure the force of blood against artery walls, helping identify hypertension or hypotension.

Oxygen saturation (SpO₂): To measure the percentage of oxygen in the blood, indicating how well the lungs are functioning.

Pain level: To assess the patient's level of pain, often using a numerical scale (0-10) or other pain assessment tools.

The nurse may also check other vitals or perform additional assessments, such as:

Weight: To monitor changes in weight, which can be important for certain conditions like heart failure or kidney disease.

Blood glucose level: To monitor blood sugar levels in patients with diabetes.

Level of consciousness: To assess the patient's alertness and responsiveness.

Let me get that for you now.

I'll also check your vitals and see if there's anything else we can do to help with the pain.

Maybe adjusting your position in bed might help as well.



NUANCES IN DIALOGUES LES NUANCES DANS LE DIALOGUE

You're welcome.
Did you manage to eat
anything this morning?

Just a little bit of
toast, but I'm not
really that hungry.



NUANCES IN DIALOGUES

LES NUANCES DANS LE DIALOGUE

You're welcome.
Did you manage to eat
anything this morning?

Just a little bit of
toast, but I'm not
really that hungry.

L'expression du ressenti par
le patient :
Un tout petit peu de pain
grillé, mais je n'ai pas très
faim, en fait.

L'infirmière répond au merci du
patient de l'écran d'avant
You are welcome = De rien

Puis elle demande si il a mangé :
Avez-vous réussi à manger quelque
chose ce matin ?



NUANCES IN DIALOGUES

LES NUANCES DANS LE DIALOGUE



You're welcome.
Did you manage to eat anything this morning?

Just **a little bit** of toast, but I'm not **really** that hungry.

Dans cette phrase, les nuances sont subtiles et liées à la politesse et à l'intérêt porté au patient :

"You're welcome": C'est une réponse polie standard à un remerciement. Elle montre que l'infirmière est heureuse d'avoir pu aider et que ce n'était pas un problème pour elle.

"Did you manage to eat anything this morning?": Cette question montre que l'infirmière se soucie du bien-être du patient et de son apport nutritionnel. L'utilisation de "manage to" suggère qu'elle comprend que manger peut être difficile pour le patient en raison de sa condition ou de son manque d'appétit. Elle ne demande pas simplement "Avez-vous mangé ?", ce qui pourrait être perçu comme moins empathique.

Ces deux phrases, bien que simples, véhiculent de la politesse, de l'empathie et un intérêt sincère pour le patient, ce qui est essentiel dans une relation de soins.

Dans la phrase "Just **a little bit** of toast, but I'm not **really** that hungry", les mots "a little bit" et "really" ont les fonctions suivantes:

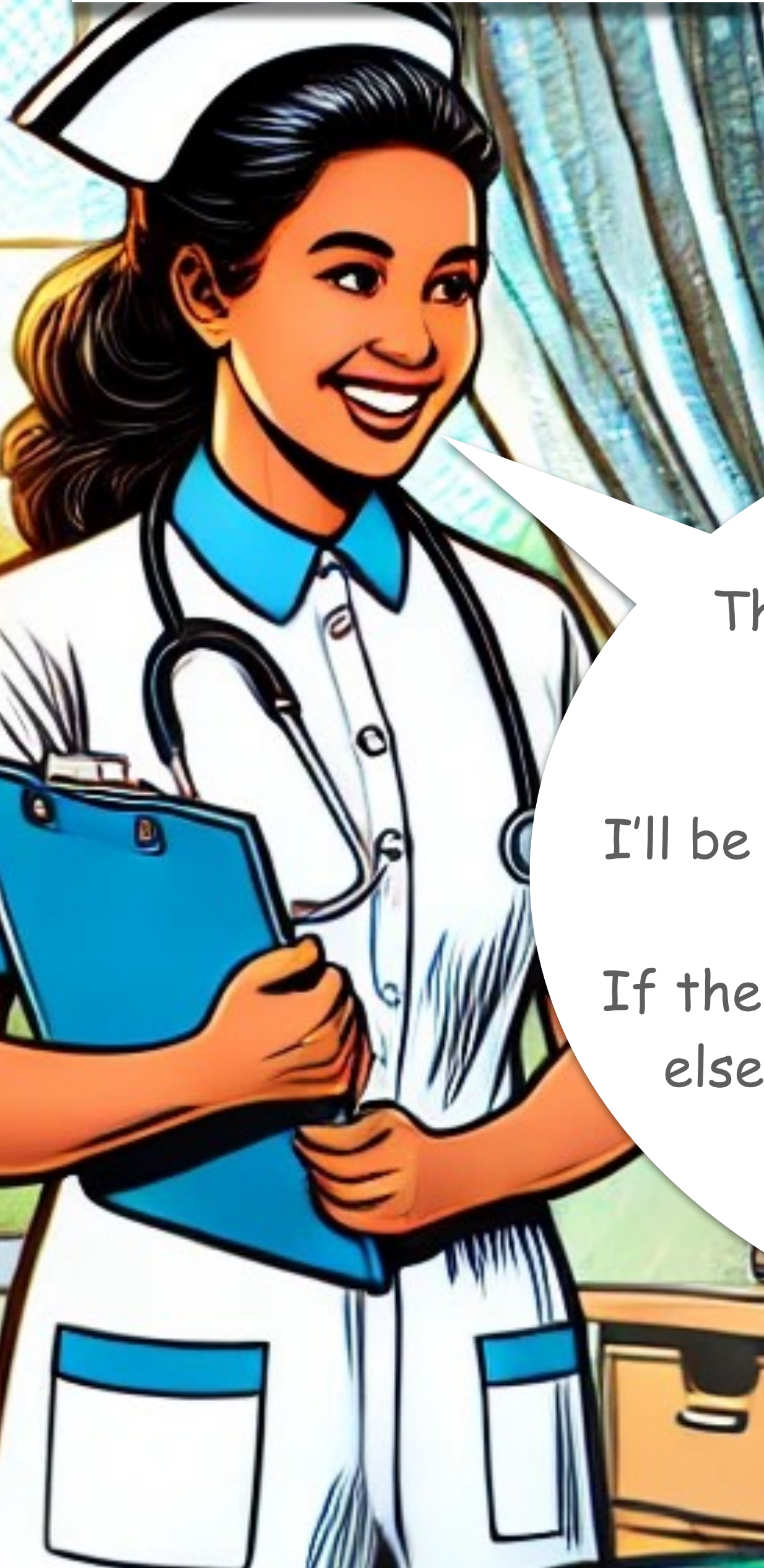
"a little bit" : Cette expression fonctionne comme un adverbe de quantité. Elle modifie le nom "toast" pour indiquer une petite quantité. On pourrait la traduire par "un peu de" ou "une petite quantité de".

"really" : Cet adverbe sert à intensifier l'adjectif "hungry". Il renforce la négation, indiquant que la personne n'a pas vraiment très faim. On pourrait le traduire par "vraiment" ou "tellement".

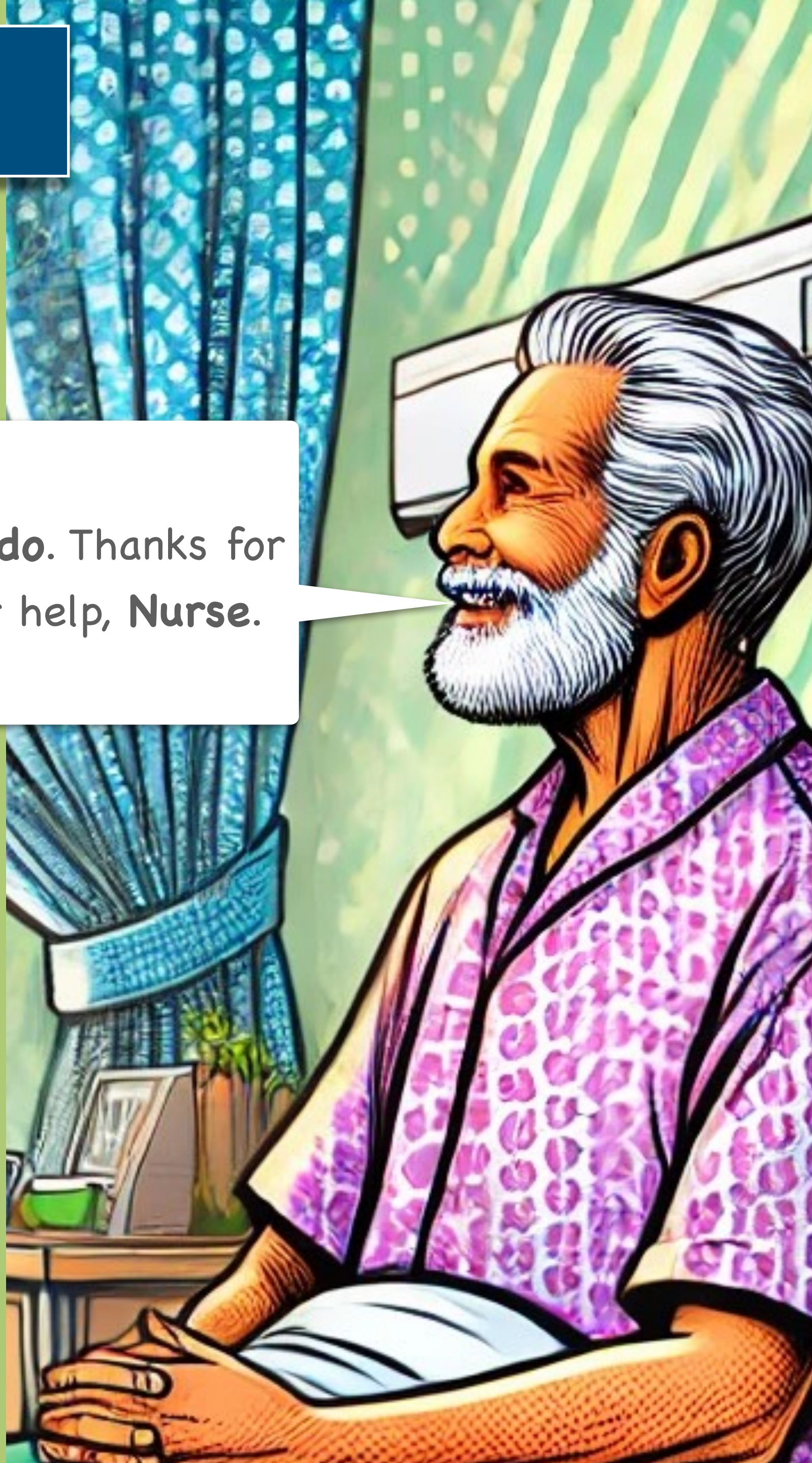
En résumé, ces deux mots contribuent à nuancer le sens de la phrase en précisant la quantité de nourriture consommée et l'intensité de la faim ressentie par le patient.



SPEAKING LIKE A NATIVE PARLER COMME UN ANGLOPHONE



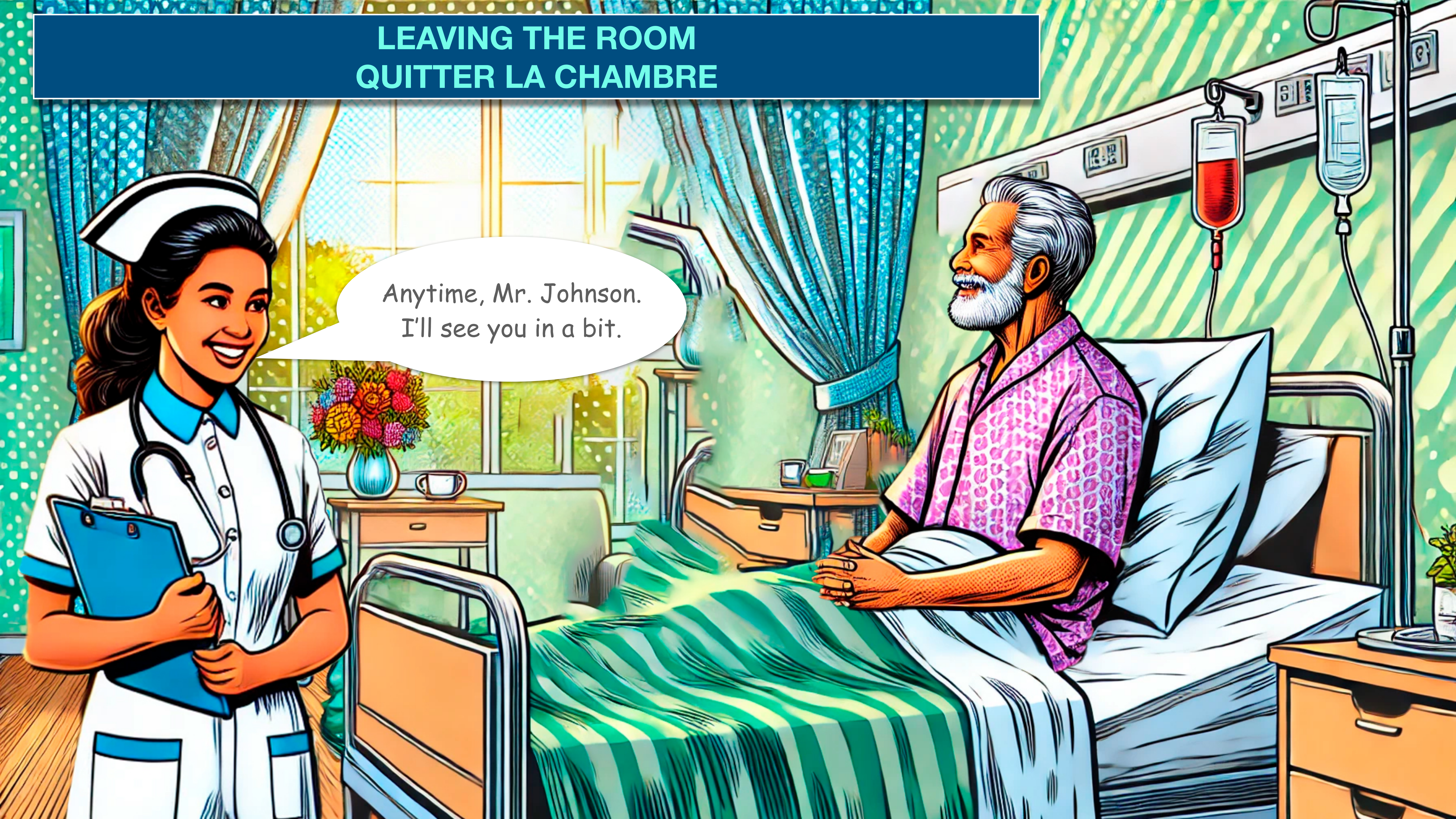
That's okay, as long as you're getting something down.
I'll make a note of that too.
I'll be back in a little while to see how you're doing.
If the pain gets worse or if you need anything else in the meantime, just press the call button, alright?



Will do. Thanks for your help, Nurse.

LEAVING THE ROOM QUITTER LA CHAMBRE

Anytime, Mr. Johnson.
I'll see you in a bit.



THE END

FOR TODAY



SEE YOU ONLINE

madmolf@gmail.com