ENGLISH

| - 1 | Yes. No. Don't know. I don't understand. |
|-----|--|
| 2 | What is your name? Can you write it in English? |
| 3 | Please write your address. |
| 4 | How old are you? |
| 5 | Can you give us the name and telephone number or address of someone to be contacted? |
| 6 | You will be examined soon by a doctor. ² nurse. |
| 7 | Have you had an accident? When? (show on calendar and clock) |
| 8 | Did you lose consciousness? |
| 9 | When did you become ill? (show on calendar and clock) |
| 10 | Have you any pain? Point where. When did it start? (show on calendar and clock) |
| | What is your level of pain? I (not in pain) 2 3 4 5 6 7 8 9 10 (chronic pain) |
| 12 | The pain, is it constant? Or does it come and go? |
| 13 | Have you any bleeding? Point where. |
| 14 | Do you have a cough? Do you cough anything up? What colour? white? yellow-green? red? brown? |
| 15 | Are you short of breath? |
| 16 | Have you vomited? Have you vomited blood? |
| 17 | Have you any diarrhoea? |
| 18 | Are you constipated? |
| 19 | Have you passed black stools? |
| 20 | Do your ankles swell? |
| 21 | Have you lost weight? |
| 22 | Have you difficulty 'seeing? 'hearing? 'swallowing? 'walking? |
| 23 | Have you ever had an operation? Point where. |
| 24 | When did your last menstrual period begin? (show on calendar) Are you pregnant? How many months pregnant are you? Could you possibly be pregnant? Can we do a pregnancy test? |
| 25 | Do you smoke? How many cigarettes a day? |
| 26 | Do you have 'sugar diabetes? ² epilepsy? ³ asthma? |
| 27 | Have you ever had 'heart problems? ² angina? ³ high blood pressure? ⁴ heart attack? ⁵ stroke? ⁶ jaundice? ⁷ hepatitis? |
| 28 | Are you allergic to any medicine? Penicillin? Aspirin? Any other medicine? |
| 29 | Are you taking any medicine now? Have you some with you? Are you taking any other drugs or natural remedies? |
| 30 | How many tablets have you taken? |
| 31 | Are you up to date with tetanus immunisation? |

ENGLISH

| 32 | Have you been to a country outside the UK recently? Which one? When? |
|-------------------------|--|
| 33 | I am a: ¹nurse. ²doctor. ³first aider. ⁴paramedic. ⁵social worker. |
| 34 | May I examine you? Do you mind being examined by 'a man? ² a woman? |
| 35 | Sorry, this might hurt. |
| 36 | I need to take your blood pressure. |
| 37 | I need to listen to your chest. |
| 38 | I need to test your heart. |
| 39 | I need to examine you internally. |
| 40 | I need to give you an injection. |
| 41 | I need to pass this tube. |
| 42 | I need to take a sample of your blood. |
| 43 | I need to send you for an X-ray. |
| 44 | I need to give you some stitches. You need to go to your doctor to get your stitches out on this day (show on calendar and clock). |
| 45 | You have a broken/fractured: 'leg. ² ankle. ³ arm. ⁴ wrist. ⁵ shoulder. |
| 46 | You need to have a cast put on your: leg. 2ankle. 3arm. 4wrist. |
| 47 | You need to keep this (point) on until this date (show on calendar). |
| 48 | Please pass water into this container. |
| 49 | Do not eat or drink anything. |
| 50 | You may get up now. |
| 51 | You need to stay in hospital. |
| | Please wait until there is a bed available on the ward. |
| 52 | Everything will be all right. Don't worry. |
| 53 | Shall I call a taxi for you? |
| 54 | Use this if you need help. |
| 55 | Please wait. Please come this way. You may go home. |
| 56 | Please come back if you have more problems. |
| 57 | Let me repeat that back to you |
| Questions from patients | |
| 58 | How long will I be waiting? up to I hour up to 2 hours up to 3 hours up to 4 hours |
| 59 | Will someone call my name? |
| 60 | Where is the telephone, I need to ring my family/friend? |
| 61 | Please can you call a taxi for me to go home? |
| 62 | Am I going to be alright? |