



SHaping the Interpreters of the Future and of Today www.shiftinorality.eu



### SHIFT in Orality preparatory materials – Intellectual Output 5

SHIFT in Orality Summer School of Remote Interpreting – Forlì, June 11<sup>th</sup>-16<sup>th</sup>, 2018

NON- SCRIPTED ROLE-PLAY

# **Role play: Doctor-patient CHF consultation**

# Scenario description

A patient has recently been diagnosed with congestive heart failure (CHF) and high blood pressure. He/She is being treated but decides to return to the doctor as he/she has recently started to experience additional symptoms and is worried that his/her condition may be worsening. **Speaker 1** (the doctor) needs to ask a series of questions to ascertain what is happening, whether these symptoms are linked to the diagnosed condition and make sure that the patient is following the treatment accurately. **Speaker 2** (the patient) does not speak the same language as the doctor. The meeting takes place in the local hospital where the patient is being treated. An interpreter has been contacted via video-link to enable the patient and doctor to communicate, as they do not speak the same language.

### Brief for Speaker 1: Doctor

Your role	You are a cardiologist who has been working at the local hospital for over twenty years
General purpose and content of the meeting	You are a doctor with expertise in CHF, which is a serious long-term condition that will usually continue to get slowly worse over time. It can severely limit the activities one is able to do and is often eventually fatal. Your role is to ascertain whether the patient is experiencing some 'new' symptoms and whether these are linked to the specific condition he/she is suffering from. You saw the patient not long back and diagnosed him/her with CHF. You will have to suggest whether additional medical tests need to be done and decide or whether it is safe to send the patient home.
Information about your interlocutor	A foreign patient, who has lived in the country for a few months but does not speak the language very well yet and may struggle to explain him/herself and his/her symptoms without the support of an interpreter.
Aspects / questions that should be addressed	<ul> <li>Greet your interlocutor and calm him/her down.</li> <li>Points to discuss: <ul> <li>taking blood pressure and discussing recent episodes of hypertension (since the previous consultation)</li> <li>patient's 'new' symptoms, such as pain in different locations, etc.</li> <li>how the treatment ACE inhibitors and beta-blockers treatment is going (whether the medications are being taken regularly, whether the patient is experiencing any of the adverse effects discussed in the previous meeting)</li> <li>recommended diet (whether the patient is following a low-salt diet to keep high blood pressure and swelling (also called edema) under</li> </ul> </li> </ul>





SHaping the Interpreters of the Future and of Today www.shiftinorality.eu



# SHIFT in Orality preparatory materials – Intellectual Output 5

SHIFT in Orality Summer School of Remote Interpreting – Forlì, June 11<sup>th</sup>-16<sup>th</sup>, 2018

NON- SCRIPTED ROLE-PLAY

control

#### **Brief for Speaker 2: Patient** Your role You are a patient, who has recently been diagnosed with congestive heart failure and high blood pressure. You have been treated in a local hospital and are following a treatment which involves taking some medications on a regular basis, namely ACE inhibitors and beta-blockers. General purpose and You are meeting the cardiologist who diagnosed your condition and as you content of the have been experiencing what you consider 'new' symptoms and you are meeting/encounter worried they may be linked to a worsening of your condition. You are also worried you may inadvertently be doing something wrong, so you need reassurance. Information about Your interlocutor is a cardiologist with twenty years of experience. your interlocutor Aspects / questions Points to discuss: that should be Constant feeling of tiredness, even when you have done nothing to addressed justify such state Ankles have been getting 'fat', especially at night – although you had been warned that this might happen, you are worried that what you are experiencing is a little extreme Breathing has become more difficult, especially when climbing steps Sleeping has become more difficult and you have started sleeping on two or more pillows in order to get comfortable Sometimes feel sick to your stomach, like you have eaten too much (even when it is not right after a meal) No chest pain, but you do feel tightness at times





SHaping the Interpreters of the Future and of Today www.shiftinorality.eu



# SHIFT in Orality preparatory materials – Intellectual Output 5

SHIFT in Orality Summer School of Remote Interpreting – Forlì, June 11<sup>th</sup>-16<sup>th</sup>, 2018 NON- SCRIPTED ROLE-PLAY

Brief for the interpreter	
General information	You have been booked as a remote interpreter by a local hospital (you have already done similar assignments). The hospital told you that you would have to interpret at a meeting between a cardiologist and a patient who suffers from congestive heart failure. The patient has been treated in the same hospital before but has requested a second check – the reasons for this are not communicated to you. The doctor, who is cardiologist, needs to ask a series of questions to determine whether the patient's condition is stable. The patient does not speak the same language as the doctor.