

MODULE 1 Communication and Terminology for the
Workplace

TOPIC 5 Giving Instructions on Medical Procedures

LEARNING OUTCOMES:

By the end of this lesson, participants will be able to:

- ◆ give and follow instructions for emergency medical procedures

| TOPIC | SKILLS | CLB COMPETENCE AREA | COMPETENCIES | PRE-TASKS | TASK | POST TASK |
|--|--|---|--|---|--|--|
| <ul style="list-style-type: none"> ◆ Medical Procedures | <ul style="list-style-type: none"> ◆ Listening/ Speaking ◆ Reading | <ul style="list-style-type: none"> ◆ following and giving instructions ◆ formatted text ◆ unformatted text | <ul style="list-style-type: none"> ◆ understand and follow instructions ◆ give oral instructions ◆ check for understanding of instructions ◆ explain simple medical procedures ◆ give clarification ◆ use medical terminology associated with emergency procedures | <ul style="list-style-type: none"> ◆ differentiate between active and passive verbs ◆ review common instructional verbs ◆ read medical instructions ◆ give medical instructions ◆ review and use medical terminology associated with emergency procedures especially internal body parts | <ul style="list-style-type: none"> ◆ give and follow instructions for an emergency medical procedure ◆ check, understand, give and follow instructions for a medical procedure according to sub-sector | <ul style="list-style-type: none"> ◆ prepare verbal instructions for a simple procedure according to sub-sector |

Facilitator's Notes for Module 1

Topic 5: Giving Instructions on Medical Procedures

FACILITATOR PREPARATION

Content

Knowledge of general procedures for handling emergencies is an asset.

Delivery

As many copies as required of the following handouts should be made:

- ◆ Handout 1 Using Active Verbs
- ◆ Handout 2 Reading: Cardiopulmonary Resuscitation (two pages)
- ◆ Handout 3 Comprehension and Vocabulary Practice (two pages)
- ◆ Handout 4 Reading: Choking (three pages)
- ◆ Handout 5 Reading: Broken Bones/Reading
Comprehension and Vocabulary Practice (four pages)
- ◆ Handout 6 Task: Instructions for a Fracture
- ◆ Handout 7 Task: Instructions for Choking
- ◆ Handout 8 Evaluation Checklist (two copies per participant)

Materials Needed: access to a board, chart paper and markers, overhead projector and OHT 1.

Prepare expressions for checking understanding and requesting clarification on chart paper as needed for the task (see Methodology).

Methodology

Introduction

(15 minutes)

Introduce the lesson by discussing the importance of giving instructions in the health care setting. Health care professionals need to be able to understand and follow instructions as well as give instructions clearly. Explore with participants the situations in which they receive instructions and situations in which they give instructions. Discuss with participants what effective instruction giving involves (i.e., clear and concise language, logical sequencing of instructions, checking for understanding, etc.) Inform them that this lesson provides opportunities to practise giving instructions for simple medical procedures such as first aid procedures.

Pre-Tasks

(15 minutes) 1.

Discuss the following questions as a class:

- ◆ What is the objective of first aid?
- ◆ Should everyone be instructed in first aid? Why/why not?
- ◆ Sometimes well-meaning but uninformed people do more harm than good when they administer first aid. Give some examples of wrong things to do in various emergency situations.
- ◆ Have you ever administered first aid to a person who had an accident or suddenly became ill? What did you do? Did the person recover?

(10 minutes) 2.

Explain to participants that when giving instructions to another person, we usually use the command form of the verb in the active voice (e.g., *take*, not *taken*, *taking*). Write an instruction on the board using two different forms of the same verb to demonstrate the difference, for example:

Take this medication with some food (**Active voice**).
Some food is to be taken with this medication
(**Passive voice**).

Discuss which of the two forms of instruction is clearer and more effective? Why?

Inform participants that this activity will familiarize them with common active verbs used when giving or receiving instructions. Instruct participants to do the activity on Handout 1 on their own. Check answers after activity is completed.

(25 minutes) 3.

a) Point out to participants that written instructions are often presented in the form of a numbered list. Refer them to the instructions for giving first aid to a victim of an epileptic seizure in Handout 2. Ask them how they would use a similar strategy when giving verbal instructions. Provide cues to elicit information, i.e., transition markers to signal different steps (*first, second, next*); pronunciation features such as pitch, stress and volume to signal vital information.

b) Instruct the participants to read the text in Handout 2. Then they should complete the reading comprehension and vocabulary exercises in Handout 3. Check answers as a class.

c) Form pairs of participants. Provide each pair with a piece of flipchart paper and a marker. Show OHT 1 on an overhead projector. Tell participants to write the instructions for administering CPR using the reading text as the basis. Remind them to use active verbs, concise language, and to number instructions to reflect the correct sequence of steps.

Display the versions from the different pairs of participants. Have them compare the versions for accuracy, clarity, and effectiveness. Point out how these characteristics were achieved.

d) Ask some of the participants to give the instructions they have prepared verbally. Remind them to use the features discussed in a) above (transition markers, intonation, etc.)

(30 minutes) 4.

Divide participants into two groups, an A group and a B group. Participants in group A work with Handout 4 (reading on emergency procedures for choking);

participants in group B work with Handout 5 (reading on emergency procedures for broken bones). Participants do the comprehension and vocabulary exercises on their own. Check answers as a class when the exercises are completed.

Task

(30 minutes) 1.

Form pairs, each pair consisting of either two A or two B participants (each pair should have identical handouts). Explain that each pair will work together to write instructions for giving first aid in the emergency situation depicted in their handout. Inform participants that they should write instructions to be given verbally. Remind participants to observe the following guidelines when giving instructions orally (write them on the board or on a flipchart):

- ◆ use clear, simple language
- ◆ use appropriate active verbs
- ◆ sequence steps in the procedure logically, i.e., in the order in which they must be performed
- ◆ use transition markers (e.g. first, second, finally, after that, then, etc.)
- ◆ ask questions to check that instructions are understood

Have the following expressions prepared on chart paper:

Expressions for Checking Understanding

Do you follow?

Okay?

Do you understand what I'm saying?

Are you clear about this?

Would you like me to go over/repeat that?

Expressions for Requesting Clarification

What does (X) mean?

What do you mean by (X)?

Should I do (X) before (Y)?

Could you go over that again, please?

Distribute Handout 6 (to participants designated B) and Handout 7 (to participants designated A) for detailed instructions for completing the task.

- (30 minutes)** 2. Form new pairs of participants, an A participant with a B participant (each pair should have instructions for first aid to be administered in two different emergency situations). Distribute Handout 8 (Evaluation Checklist). Participants in each pair take turns giving verbal instructions to each other in the first aid procedure for which they have prepared instructions.
- (15 minutes)** 3. Instruct participants to give feedback to the person giving instructions on how understandable they were, and specifically what aspects of their instruction giving they need to improve in. They should use the Evaluation Checklist (Handout 8) to record their observations.
- (20 minutes)** 4. At the end of the task on giving instructions, bring participants together as a class for an activity that allows them to share the new vocabulary they learned from the reading texts used in the task. Divide the blackboard into two sections, one with the heading “Words Relating to Emergency Conditions” and the other with the heading “Words Relating to Treatment”. Have participants volunteer appropriate words from their reading to make a list of words under each heading. Another section of the board could be used for medical words relating to parts of the body that they have learned in this lesson, if time permits. Check and correct pronunciation of words listed.

Post-Task

- (30 minutes)**
1. Participants form groups of three to four according to sub-sector. Each group decides on a simple procedure often performed in their profession. The group then prepares verbal instructions for performing the procedure chosen.
 2. Participants form pairs with a participant from another group. Participants take turns instructing each other in

the procedure from their profession that they have prepared instructions for in 1 above.

3. Remind participants to give feedback on the comprehensibility and effectiveness of the instructions given using another copy of the Evaluation Checklist (Handout 8).

4. Monitor instruction giving as it proceeds. Intervene only when necessary. Provide feedback on participants' performance at the end of the post-task. Model more effective ways of instructing as necessary.

Handout 1

Using Active Verbs

Match each verb below with the meaning it usually has in a medical setting.

| COLUMN A | COLUMN B |
|-----------------|---|
| 1) administer | a) put |
| 2) preserve | b) give (first aid, etc.) |
| 3) assess | c) go with |
| 4) arrange | d) recognize differences |
| 5) ensure | e) find out the facts about something |
| 6) maintain | f) reduce (make less) |
| 7) control | g) keep something from happening |
| 8) apply | h) regain health after illness |
| 9) establish | i) conclude; decide |
| 10) accompany | j) suppose; believe |
| 11) assume | k) ask for someone's opinion or advice |
| 12) consult | l) believe something is true because of good evidence |
| 13) determine | m) save something from damage, loss or destruction |
| 14) distinguish | n) consider all the facts of a situation or problem, decide what the position is and what is likely to happen |
| 15) induce | o) make plans and preparations |
| 16) minimize | p) make certain |
| 17) place | q) support |
| 18) prevent | r) prevent something from becoming worse |
| 19) recover | s) put something on a surface or rub it in |
| 20) suspect | t) discover facts that show that something (e.g. cause of death) is true |

FACILITATOR'S NOTES FOR HANDOUT 1

Using Active Verbs

Match each verb below with the meaning it usually has in a medical setting

| COLUMN A | COLUMN B |
|--------------------------|---|
| 1) administer b | a) put |
| 2) preserve m | b) give (first aid, etc.) |
| 3) assess n | c) go with |
| 4) arrange o | d) recognize differences |
| 5) ensure p | e) find out the facts about something |
| 6) maintain q | f) reduce (make less) |
| 7) control r | g) keep something from happening |
| 8) apply s | h) regain health after illness |
| 9) establish t | i) to cause |
| 10) accompany c | j) suppose; believe |
| 11) assume j | k) ask for someone's opinion or advice |
| 12) consult k | l) believe something is true because of good evidence |
| 13) determine e | m) save something from damage, loss or destruction |
| 14) distinguish d | n) consider all the facts of a situation or problem, decide what the position is and what is likely to happen |
| 15) induce i | o) make plans and preparations |
| 16) minimize f | p) make certain |
| 17) place a | q) support |
| 18) prevent g | r) prevent something from becoming worse |
| 19) recover h | s) put something on a surface or rub it in |
| 20) suspect l | t) discover facts that show that something (e.g. cause of death) is true |

Handout 2 (page 1 of 2)

I. Indicating sequence in giving instructions

Discussion: The instructions below for giving first aid to a victim of an epileptic seizure are taken from a first aid manual. What does the layout tell you about the order in which the various steps is to be given? How would you reflect this sequence when you give the same instructions verbally?

FIRST AID: EPILEPTIC SEIZURE

DO NOT

- restrain the victim or place anything in the mouth
- attempt to move the victim unless he or she is in danger of further injury

- 1** Carefully loosen tight clothing around the neck
- 2** When the attack is over, place the victim in the recovery position and allow him or her to regain consciousness.

II. Reading: Cardiopulmonary Resuscitation

Read the text below. Then complete the exercises that follow.

1. Medical problems do not always develop slowly. Sometimes there are emergencies. An emergency is a situation that requires immediate care to prevent greater harm to the patient. However, it is not always possible to get professional medical help right away, so it is important for everyone to be familiar with first-aid procedures.
2. The main objective of first aid is to save lives. Fortunately, most first-aid procedures are not complicated and can be performed by someone with a minimum of training. In all emergency cases, a doctor should be called as well as an ambulance, if necessary. A written log should be made stating what treatment was administered and when it was started and completed. This information will be important to the medical personnel who treat the patient later.
3. One of the most serious emergencies occurs when an individual has stopped breathing. This may be the result of asphyxiation, electrocution, drowning, a heart attack, or some other cause. After only four minutes without oxygen, brain damage is likely. To prevent brain damage or death, artificial respiration must be started immediately.
4. Before resuscitation is begun, the victim should be placed face-up on a hard, flat surface. Rough handling should be avoided due to possible fractures that could cause spine injury, paralysis, or other internal injuries. The primary considerations include restoration of breathing and heartbeat. Clothing should be loosened and foreign matter or vomit cleared from the mouth.

Handout 2 *(page 2 of 2)*

5. Cardiopulmonary resuscitation (CPR) of a patient involves two procedures. The first is getting oxygen into the blood by blowing air into the lungs. Mouth-to-mouth breathing is the most effective form of artificial respiration. In this method, the rescuer breathes into the victim's mouth and nose in a regular rhythm, about 12 to 15 times per minute for an adult and 20 times for a child. As the air enters the lungs, the chest will expand. The second procedure is the application of chest pressure to compress the heart and force blood into the circulatory system. Pressure is applied with the heels of the hands on the victim's chest in a rocking motion, about 60 times a minute. This routine should not be stopped for longer than a beat or two. Even if one is fatigued, it is important to continue resuscitation efforts until help arrives. If one is alone with a victim, breathing and massage must be alternated, but CPR is much easier and far more effective if performed by a team of two. Anyone can learn CPR in classes offered by the American Red Cross or by local fire departments. The more people who are trained to administer CPR, the more lives can be saved.

Handout 3

A. Comprehension Check

Mark each statement below T (true) or F (false). Correct the statements that are false.

- _____ 1. First aid does not need to be administered if professional medical help is on its way.
- _____ 2. Making detailed notes of first aid treatment given to the victim is an important part of giving first aid.
- _____ 3. Asphyxiation is the reason why a person stops breathing.
- _____ 4. "Rough handling should be avoided." This statement tells the rescuer not to move the victim at all.
- _____ 5. If possible, CPR should be administered by two persons.

B. Vocabulary Practice

1. What is the original meaning of the word *emerge*?

Check in a medical or general dictionary.

How does this relate to the word *emergency*?

2. Write the meanings of the words *suscitate* and *resuscitate*.

What does a resuscitator do? _____

3. What is the connection between the word *arrest* as it is used in medicine and as it is used in law enforcement?

4. When the heart is functioning normally, it beats with a steady _____.

5. When you compress something with your hands, do you push on it or pull it?

6. What happens when a person is fatigued? What can cause fatigue?

7. What is a tourniquet used for?

8. If a tourniquet is kept tight for a long time, what damage might result?

9. When tissue dies as a result of inadequate blood supply, the resulting condition is _____.

10. Give some examples of medical emergencies.

FACILITATOR'S NOTES FOR HANDOUT 3

A. Comprehension Check

1. F It must be administered under all circumstances, particularly if the patient's life is in danger.
2. T
3. F There are other reasons why a person stops breathing.
4. F Be gentle under all circumstances.
5. T

B. Vocabulary Practice

1. Original meaning of *emerge*: come up or out into view (The Concise Oxford Dictionary)
Relation of *emerge* to *emergency*: accept any reasonable/logical explanation.
2. *Suscitate*: From Latin *suscitare* "raise" (The Concise Oxford Dictionary)
Resuscitate: to resume breathing

A *resuscitator* is a person who helps someone who has stopped breathing to resume breathing.
3. *Arrest* means "*stoppage*" in medicine; the *seizing* of a person in law enforcement. Both uses include "loss of movement".
4. When the heart is functioning normally, it beats with a steady *rhythm*.
5. You push on it.
6. When a person is *fatigued*, he is physically very tired. Extreme physical exertion can cause *fatigue*.
7. A *tourniquet* is a strip of cloth that is wrapped tightly round an injured arm or leg in order to stop it bleeding.
8. *Gangrene* results if a tourniquet is kept tight for a long time.
9. When tissue dies as a result of inadequate blood supply, the resulting condition is *gangrene*.
10. Examples of medical emergencies: when an individual has stopped breathing as a result of a heart attack, drowning, etc.; severe bleeding; choking on food; severe head injuries; neck and back injuries

OHT 1

Prepare instructions for giving CPR

1. Work with a partner. Write instructions for giving CPR using the information in the reading text. Remember to use active verbs, concise language, and to number instructions to reflect the correct sequence of steps.
2. Compare the instructions you have prepared with those prepared by other participants. Discuss differences and make changes if necessary.

Handout 4 (page 1 of 3)

Read the text below. Then complete the exercises which follow.

A common emergency is choking on food, or any inhaled or swallowed foreign body. Choking is caused by blockage of any part of the airway – the pharynx (throat), larynx (voice-box), trachea (windpipe) or bronchi (air passages from the trachea to the lungs). Most cases of choking occur when food or drink “goes down the wrong way”, that is, when it enters the trachea and bronchi instead of passing from the pharynx into the oesophagus (gullet). Since the victim cannot talk because of the blocked trachea, it is important that others recognize the danger and act promptly. A person who chokes will try to expel the object by forceful coughing. The victim should be encouraged to cough up the obstruction. If this fails, the rescuer should bend the victim over and slap him between the shoulder blades. If this does not work, abdominal thrusts should be given to dislodge the obstructing object. In this method, the victim is clasped from behind by the rescuer. He then places one fist under the sternum (breastbone) of the victim and clasps the fist with the other hand. The rescuer then makes a quick, hard thrusting movement inwards and upwards until the foreign object is impelled out of the trachea, and the victim is able to breathe.

I. Comprehension Check

Mark each statement below **T** (true) or **F** (false). Correct the statements that are false.

- _____ 1. Choking is caused by blockage of the pharynx.
- _____ 2. A person who is choking should try his best to cough up the obstructing object on his own.
- _____ 3. The first thing the rescuer should do is to slap the choking victim on the back.
- _____ 4. Abdominal thrusts should be given after back blows have failed to dislodge the obstructing object.
- _____ 5. When giving abdominal thrusts to a choking victim, the rescuer should grasp the victim’s hands firmly.
- _____ 6. Bronchi are part of the skeleton.

Handout 4 (page 2)

II. Label the different parts of the respiratory system

Use the medical terms you have learned in the reading text and earlier lessons to label the diagram of the respiratory system below.

| | | | |
|-------------------------|---------------------|--------------------|--------------------------|
| mediastinum | lower lobe (2) | left main bronchus | rib |
| trachea | frontal sinus | sphenoid sinusq | tongue |
| upper lobe of left lung | nasal cavity | pleural cavity | oropharynx |
| middle lobe | pleura | tonsils | upper lobe of right lung |
| bronchioles | nasopharynx | diaphragm | larynx with vocal chords |
| nose | right main bronchus | oral cavity | epiglottis |
| esophagus | | | |

Handout 4 *(page 3 of 3)***III. Vocabulary Practice**

Match the medical terms with the common words that mean the same by writing the correct numbers on the lines. Use a dictionary, if necessary.

- | | | |
|--------------|-------|--|
| 1. larynx | _____ | breastbone |
| 2. trachea | _____ | voice-box |
| 3. bronchi | _____ | throat |
| 4. sternum | _____ | windpipe |
| 5. pharynx | _____ | air passages from the trachea to the lungs |
| 6. esophagus | _____ | shoulder blade |
| 7. thorax | _____ | gullet |
| 8. scapula | _____ | chest |

FACILITATOR'S NOTES FOR HANDOUT 4**I. Comprehension Check**

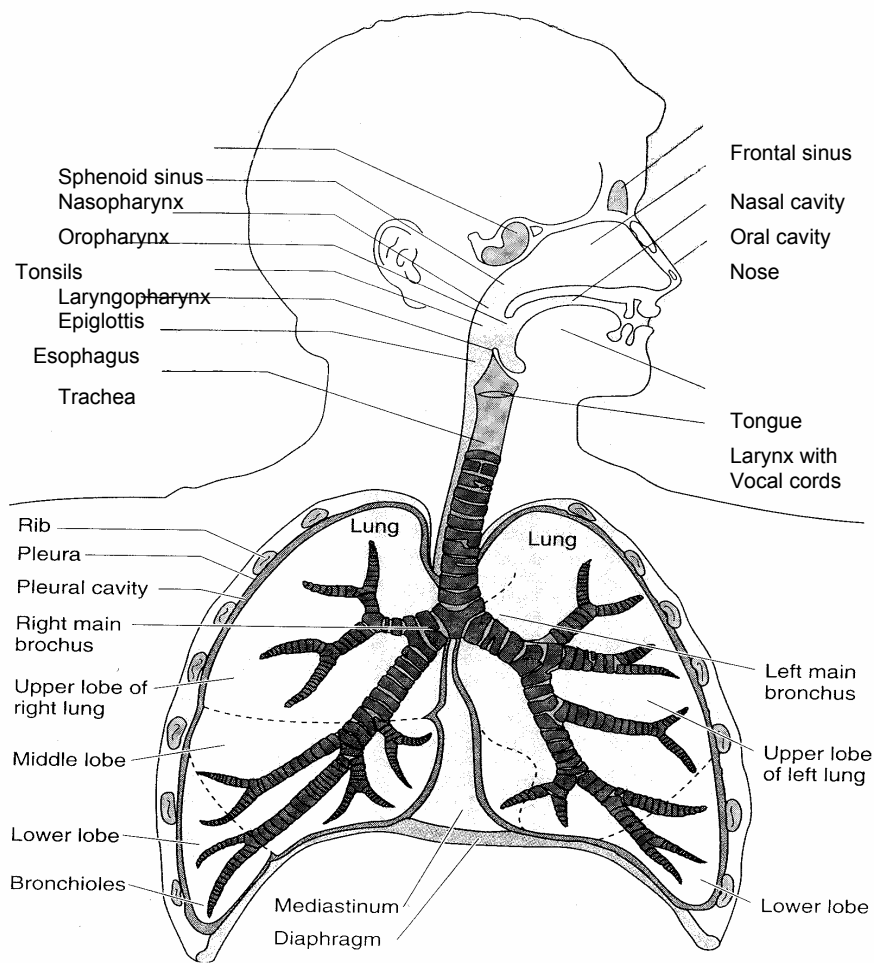
Mark each statement below **T** (true) or **F** (false). Correct the statements that are false.

- F** 1. Choking can be caused by blockage of any part of the airway—the pharynx, larynx, trachea or bronchi.
- T** 2.
- F** 3. The first thing the rescuer should do is encourage the person to cough up the obstruction. Abdominal thrusts should be given after back blows have failed to dislodge the obstructing object.
- T**
- F** 4.
- F** 5. When giving abdominal thrusts to a choking victim, the rescuer clasps the victim from behind. The rescuer holds one of his/her own fists with the other hand.
6. Bronchi are air passages from the trachea to the lungs.

FACILITATOR'S NOTES FOR HANDOUT 4 (PAGE 2)

II. Label the different parts of the respiratory system

Use the medical terms you have learned in the reading text and earlier lessons to label the diagram of the respiratory system below.



FACILITATOR'S NOTES FOR HANDOUT 4 (PAGE 3)

Vocabulary Practice

Match the medical words with the common words that mean the same by writing the correct numbers on the lines. Use a dictionary, if necessary.

- | | | |
|--------------|--------------|--|
| 1. larynx | <u> 4 </u> | breastbone |
| 2. trachea | <u> 1 </u> | voice-box |
| 3. bronchi | <u> 5 </u> | throat |
| 4. sternum | <u> 2 </u> | windpipe |
| 5. pharynx | <u> 3 </u> | air passages from the trachea to the lungs |
| 6. esophagus | <u> 8 </u> | shoulder blade |
| 7. thorax | <u> 6 </u> | gullet |
| 8. scapula | <u> 7 </u> | chest |

Handout 5 (page 1)

Read the text below. Then complete the exercises that follow.

A very common emergency is a broken bone. A bone is usually broken directly across its width, but can also be fractured lengthwise, obliquely, or spirally. Fractures are divided into two main types: closed (or simple) and open (or compound). In a closed fracture the broken bone ends remain beneath the skin and little of surrounding tissue is damaged; in an open fracture one or both bone ends project through the skin. Fractures may also be classified according to the shape or pattern of the break.

Most fractures are caused by a sudden injury that exerts more force on the bone than it can withstand. The force may be direct, as when a finger is hit with a hammer, or indirect, as when twisting the foot exerts severe stress on the tibia (shin bone).

Common sites of fracture include the hand, the wrist, the ankle joint, the clavicle (collar-bone), and the neck of the femur (thigh bone) or hip, usually as a result of a fall.

If a fracture is suspected, it is best not to have the victim test it by putting pressure on it – by walking, for example. If a leg fracture is suspected and help is on the way, the victim should not be moved. The injured limb should be supported by placing one hand above the fracture and the other below it. If there is a long delay before help arrives, the injured leg should be immobilized by using the uninjured leg as a splint. Padding should be placed between the legs, especially between bony prominence (e.g. knees and ankles) and hollows should be filled. The uninjured leg should be gently brought alongside the injured one. Another person should continue to support the injured limb until immobilization is complete. If it is essential to move the victim, a long, padded splint should also be placed along the outside of the injured leg. The victim's ankles and feet should be tied together with a figure-of-eight bandage (which should pass around the splint if one is used). The bandage should be secured on the uninjured side. If the fracture is near the ankle, it may be necessary to modify the figure-of-eight bandage to avoid bandaging over the fracture site. Other bandages should then be tied around the knees, and above and below the fracture site. The fracture site itself should not be bandaged over. Do not bandage below the fracture if it is near the ankle. If a splint is being used, also bandage around the upper thighs. All knots should be tied on the uninjured side.

The injured person should not be given any food or liquid in case a general anaesthetic is needed later.

Handout 5 (page 2)

I. Comprehension Check

Mark each statement below **T** (true) or **F** (false). Correct the statements that are false.

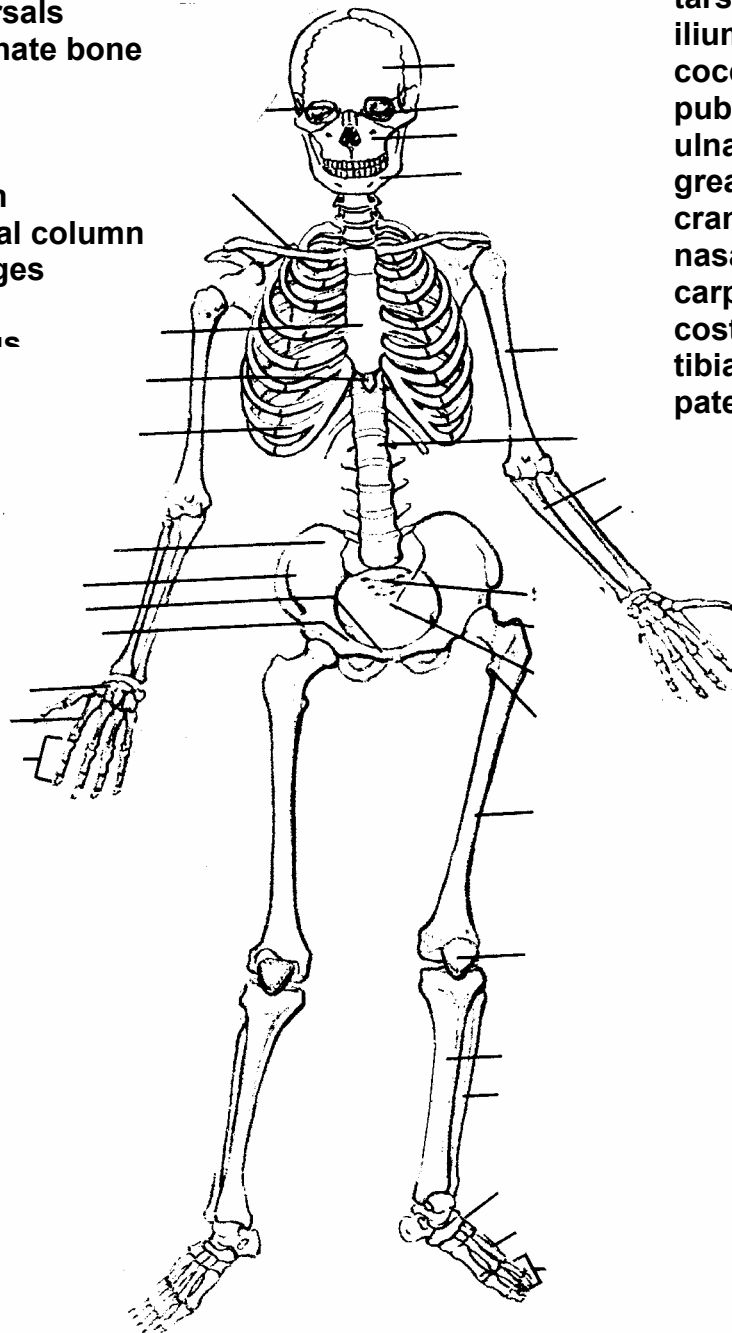
- _____ 1. A bone may be fractured in a variety of ways.
- _____ 2. To find out if your leg is fractured after a fall, try walking on it.
- _____ 3. The victim should be immobilized immediately once a fracture is suspected.
- _____ 4. A victim's uninjured leg can be used to make a splint to immobilize the injured leg.
- _____ 5. The fracture site should be completely bandaged over.
- _____ 6. It is alright to give water to the injured person to drink.

Handout 5 (page 3)

I. Label the musculo-skeletal system.

orbit

metatarsals
innominate bone
femur
fibula
sacrum
ischium
vertebral column
phalanges
maxilla
humerus



clavicle
sternum
tarsals
ilium
coccyx
pubis
ulna
greater trochanter
cranium
nasal bone
carpals
costal cartilage
tibia
patella

Handout 5 (page 4)**III. Vocabulary Practice**

Match the medical terms with the common words that mean the same by writing the correct numbers on the lines. Use a dictionary, if necessary.

- | | | |
|--------------|-------|--|
| 1. fracture | _____ | shin |
| 2. tissue | _____ | ankle bones |
| 3. clavicle | _____ | finger bones |
| 4. femur | _____ | kneecap |
| 5. carpals | _____ | a group of similar cells that work together to perform a particular function |
| 6. phalanges | _____ | a break in a bone |
| 7. patella | _____ | shoulder bone |
| 8. tibia | _____ | wrist bones |
| 9. fibula | _____ | smaller of two lower leg bones |
| 10. tarsals | _____ | bone in the upper leg (thigh) |

FACILITATOR'S NOTES FOR HANDOUT 5 PAGE 2**II. Comprehension Check**

Mark each statement below **T** (true) or **F** (false). Correct the statements that are false.

- T** 1.
- F** 2. If a fracture is suspected, the victim should not try walking.
- F** 3. The victim should be immobilized only if there will be a long delay before help arrives.
- T** 4.
- F** 5. Bandages should be applied above and below the fracture site. The fracture site itself should not be bandaged over.
- F** 6. The injured person should not be given any food or liquid in case a general anaesthetic is needed later.

FACILITATOR'S NOTES FOR HANDOUT 5 PAGE 3

III. Label the musculo-skeletal system.

FACILITATOR'S NOTES FOR HANDOUT PAGE 4.**IV. Vocabulary Practice**

Match the medical words with the common words that mean the same by writing the correct numbers on the lines. Use a dictionary, if necessary.

- | | | |
|--------------|-----------|--|
| 1. fracture | <u>8</u> | shin |
| 2. tissue | <u>10</u> | ankle bones |
| 3. clavicle | <u>6</u> | finger bones |
| 4. femur | <u>7</u> | kneecap |
| 5. carpals | <u>2</u> | a group of similar cells that work together to perform a particular function |
| 6. phalanges | <u>1</u> | a break in a bone |
| 7. patella | <u>3</u> | shoulder bone |
| 8. tibia | <u>5</u> | wrist bones |
| 9. fibula | <u>9</u> | smaller of two lower leg bones |
| 10. tarsals | <u>4</u> | bone in the upper leg (thigh) |

Handout 6

Task

Prepare instructions for giving first aid to a person suffering from a fracture

1. Work with a partner. Write instructions to be given verbally for giving first aid to a person with a leg fracture. Use information from the reading text from Handout 5 (page 1). Remember to use active verbs and concise language and to use sequencers such as first, second, next, etc.
2. Work with a different partner, one from the group using Handout 4. Instruct your partner on how to give first aid to a person with a leg fracture. If possible, have your partner carry out your instructions with the help of another participant who plays the role of the victim. Remember to follow the guidelines for giving clear instructions.
3. Listen to the instructions that your partner has prepared for administering a different first aid procedure. If possible, carry out these instructions with the help of another participant who plays the role of the victim. Give your partner feedback after the role-play by completing the Evaluation Checklist (Handout 8).

Handout 7

Task

Prepare instructions for giving first aid to a choking victim

1. Work with a partner. Write instructions to be given verbally for giving first aid to a person who is choking. Using the information from the reading text from Handout 4. Remember to use active verbs and concise language and to use sequencers such as first, second, next, etc.
2. Work with a different partner, one from the group using Handout 5. Instruct your partner on how to give first aid to a person who is choking. If possible, have your partner carry out your instructions with the help of another participant who plays the role of the victim. Remember to follow the guidelines for giving clear instructions.
3. Listen to the instructions that your partner has prepared for administering a different first aid procedure. If possible, carry out these instructions with the help of another participant who plays the role of the victim. Give your partner feedback after the role-play by completing the Evaluation Checklist (Handout 8).

Handout 8

Evaluation Checklist

Instructions: Rate your partner on the effectiveness and clarity of his or her instructions. Check Yes, No or NI (needs improvement) after each item. Use one checklist for evaluating instructions given in the Task and another checklist for evaluating instructions given in the Post-Task.

1. Were the instructions clearly presented?
2. Were the steps in the procedure correctly sequenced?
3. Were transition markers used to signal different steps?
4. Did the speaker use concise, direct language?
5. Were medical words correctly used?
6. Did the speaker check your understanding?

| Yes | No | NI |
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Suggestions for improvement: