

The Medical Industry 2



Warm up

- Have you ever been admitted into hospital? If so, do you have any interesting or unusual stories you could share?
- Can you think of times where there is an increase of hospital admissions?
- What is an admissions form?
- What kind of questions are included in an admissions form?
- Do you have any allergies?



1. Read the patients record below and fill in the form with the correct information.

14.05.1977	divorced	20 units per week	male
diabetes	James	engineer	daughter
1 Fox st. 3452 York	01223 4563	Smith	Dr. Jane Gordon
peanuts	first degree burns		

First name

Surname

Gender

D.O.B

Address

Marital Status

Occupation

Next of kin

Contact number

Alcohol intake

Medical history

Allergies

GP

Reason for admission

Present Simple Questions

- Use the auxiliary verb 'do' or 'does'

For example: Do you have any allergies?

Does your next of kin know that you're here?

How many children do you have?

The verb 'be':

- Exception: Do not use the auxiliary verb 'do' with the verb 'be'.

For example: Are you allergic to any medication?

Who is your next of kin?



2. Complete the following questions using the correct form of the present simple.

1. How many times a week you exercise?
2. you take any vitamins or supplements?
3. What your usual blood pressure reading?
4. you smoke cigarettes?
5. How many hours of sleep you typically get each night?
6. you have any chronic medical conditions?
7. How you spell your surname?
8. What your occupation?
9. Who your next of kin?
10. you allergic to any medications?





3. Read the dialogue below and answer the following questions.

Doctor: Good morning, Ms. Brown. I'm Dr Lee. I have a few questions for you. Is that okay?

Patient: Good morning, Doctor. Yes, of course.

Doctor: Okay, why are you here today?

Patient: I'm feeling a bit dizzy and have a headache.

Doctor: I see. Is this the first time?

Patient: Yes, it is.

Doctor: Okay. Do you have any allergies or medical conditions?

Patient: Yes, I have a mild allergy to penicillin.

Doctor: Thank you for letting me know. Do you take any medication?

Patient: Yes, I take blood pressure medication.

Doctor: Okay. What is your date of birth?

Patient: May 3rd, 1960.

Doctor: Thank you. And what is your occupation?

Patient: I'm a gardener.



1. Why is the patient at the doctor's office?
2. How often does the patient have these symptoms?
3. Does the patient have illnesses or conditions?
4. What medication does the patient take?
5. What does the patient do?
6. When is the patient's D.O.B?



4. Work in pairs. *Student B go to the next page.*

Take it in turns filling out the admissions form using the information on your card.

For example: *Student B: What is your name and surname?*

Student A: My name is Janet Brincat.

Student B: How do you spell Brincat?

Student A: B-r-i-n-c-a-t

Student A

First name	<i>Janet</i>
Surname	<i>Brincat</i>
Gender	<i>Female</i>
D.O.B	<i>02.11.1966</i>
Address	<i>23B Baker Street, London WC1X 8ED, United Kingdom</i>
Marital Status	<i>married</i>
Occupation	<i>Supermarket cashier</i>
Next of kin	<i>Husband</i>
Contact number	<i>+44 207 123 4567</i>
Email address	<i>j.brincat@jlx.com</i>
Alcohol intake	<i>0</i>
Medical history	<i>asthma</i>
Allergies	<i>None</i>
GP	<i>Dr. Peter Heinz</i>
Reason for admission	<i>Short breath</i>

First name	.....
Surname	.....
Gender	.....
D.O.B	.....
Address	.....
Marital Status	.....
Occupation	.....
Next of kin	.....
Contact number	.....
Email address	.....
Alcohol intake	.....
Medical history	.....
Allergies	.....
GP	.....
Reason for admission	.....



Take it in turns filling out the admissions form using the information on your cards.

For example: Student B: What is your name and surname?

Student A: My name is Janet Brincat.

Student B: How do you spell Brincat?

Student A: B-r-i-n-c-a-t

First name	<i>David</i>
Surname	<i>Brandt</i>
Gender	<i>Male</i>
D.O.B	<i>26.09.1990</i>
Address	<i>10 Clark Street, London ZC2B 9CF, United Kingdom</i>
Marital Status	<i>single</i>
Occupation	<i>Fashion designer</i>
Next of kin	<i>Friend</i>
Contact number	<i>+44 234 132 4347</i>
Email address	<i>david.brandt@newprojects.com</i>
Alcohol intake	<i>2 units of alcohol per week</i>
Medical history	<i>None</i>
Allergies	<i>Penicillin</i>
GP	<i>Dr. Emily Chen</i>
Reason for admission	<i>Abdominal pain</i>

First name	.....
Surname	.....
Gender	.....
D.O.B	.....
Address	.....
Marital Status	.....
Occupation	.....
Next of kin	.....
Contact number	.....
Email address	.....
Alcohol intake	.....
Medical history	.....
Allergies	.....
GP	.....
Reason for admission	.....