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主 编 徐 娟 杨永刚 王炎峰

项目编辑 姚 望

审读编辑 李贵莲

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客服电话 021—62865537 门市(邮购)电话 021—62869887

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Chapter One



Listening

Part 1 Questions 1 - 5

- You will hear five patients describing their pain to the nurse.
- Where does each patient have pain?
- For questions 1 – 5, mark the correct letter A – H on your answer sheet.
- You will hear each conversation twice.

A. in the eye

B. in the stomach

C. in the leg

D. in the back

E. in the chest

F. in the hands

G. in the forehead

H. in the throat

Example :

Heath	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☒	☐	☐

1. Hales	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
2. Ian	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
3. Jack	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
4. Swift	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
5. Bloomfield	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐

Part 2 Questions 6 - 10

- You will hear a conversation between Dr. Davis and Miles, the Ward Nurse, about his patient's IV infusion regimes.
- For questions 6 – 10, decide if each sentence is correct or incorrect.
- If it is correct, put a tick (✓) in the box next to A for Yes. If it is not correct, put a tick (✓) in the box next to B for No.
- You will hear each conversation twice.

Example:

0 Doctor Davis wants to review Mrs. Miles' IV fluids.	A. Yes	☐
	B. No	☒

6. Miles is looking after Mrs. Cohen all day today.	A. Yes	☐
	B. No	☐
7. Mrs. Smith's potassium levels are above average.	A. Yes	☐
	B. No	☐
8. Mrs. Smith has been started on one liter of Normal Saline for more than eight hours.	A. Yes	☐
	B. No	☐
9. Mrs. Smith's antibiotics are to be given through a separate line.	A. Yes	☐
	B. No	☐
10. Mrs. Clark's cannula is going to be removed.	A. Yes	☐
	B. No	☐

Part 3 Questions 11 - 15

- You will hear a conversation between Louisa, the Ward Nurse, and Gina about her operation.
- For questions 11 – 15, choose the correct answer A, B or C. Put a tick (✓) in the box.
- You will hear each conversation twice.

11. How was Gina feeling about her coming operation?
- A. Very anxious. ☐
- B. More excited. ☐
- C. Much confident. ☐
12. What kind of operation is she going to have?
- A. Transplant surgery. ☐
- B. Keyhole surgery. ☐
- C. Emergency surgery. ☐
13. The surgeon carries out the operation with _____.
- A. a plastic container ☐
- B. a laparoscope ☐
- C. a light cover ☐
14. How long will the plastic mini-drain remain inside after the operation?
- A. For two or three hours. ☐
- B. For three or four days. ☐
- C. For a week. ☐
15. Gina is _____.
- A. afraid of seeing the blood ☐
- B. worried about the blood's smell ☐
- C. not allowed to see its contents ☐

Part 4 Questions 16 - 20

- You will hear a conversation between a doctor and a patient.
- Listen and complete questions 16 – 20 on your answer sheet.
- You will hear the conversation twice.

SURNAME	Green	FIRST NAME(16)	_____
AGE	42	SEX	M
MARITAL STATUS	M		
OCCUPATION	Salesman		
PRESENT COMPLAINT			
(17) _____ chest pain started with severe attack. Pain lasted (18) _____ mins, relieved by rest. Has occurred when shopping.			

O/E				
General Condition				
ENT				
RS	Chest(19) _____			
CVS	P	70/min	(20) _____	130/80
	HS	normal		
POINTS TO NOTE				

Reading

Structures of the Lung and the Kidney

The Blood Vessels of the Lung

The lung receives its blood supply from two vascular systems—the bronchial and pulmonary circulations. The nutritive blood flow to all but the alveolar structures comes from the bronchial circulation, which originates from the aorta and upper intercostal arteries and receives about 1 per cent of the cardiac output. About one third of the venous effluent of the bronchial circulation drains into the systemic veins and back to the right ventricle. The remainder drains into the pulmonary veins and, along with the contribution from the Thebesian veins in the heart, represents a component of the 1 to 2 per cent right-to-left shunt found in normal subjects.

The pulmonary arterial system runs alongside the airways from the *hila* (肺门) to the periphery. The arteries down to the level of the subsegmental airways (2mm diameter) are thin-walled, predominantly elastic vessels. Beyond this, the arteries become muscularized until they reach diameters of 30 μ m, at which point the muscular coat disappears. Most of the arterial pressure drop takes place in these small muscular arteries, which are responsible for the active control of blood flow distribution in the lung. The pulmonary arterioles empty into an extensive capillary network and drain into thin-walled pulmonary veins, which eventually join with the arteries and bronchi at the hilum and exit the lung to enter the left atrium.

Elements of Renal Structure

The human kidneys are anatomically positioned in the retroperitoneal space at level of the lower thoracic and upper lumbar vertebrae. Each adult kidney weighs approximately 150gm and measures about 12 by 6 by 3cm. A coronal section of the kidney reveals two distinct regions. The outer region, the cortex, is about 1cm in thickness. The inner region is

the medulla and is made up of several conical structures. The bases of these pyramidal structures are located at the corticomedullary junction, and the apices extend into the hilum of the kidney as the papillae. Each papilla is enclosed by a minor calyx; these calyces collectively communicate with major calyces, forming the renal pelvis. Urine that flows from the papillae is collected in the renal pelvis and passes to the bladder through the ureters.

Blood is delivered to each kidney from a main renal artery branching from the aorta. The main artery usually divides into two main segmental branches, which are further subdivided into lobar arteries supplying the upper, middle, and lower regions of the kidney. These vessels subdivide further as they enter the renal parenchyma and create interlobar arteries that course toward the renal cortex. These smaller arteries provide perpendicular branches, the arcuate arteries, at the corticomedullary junction. Interlobular arteries arising from the arcuates extend into the cortex. The glomerular capillaries receive blood through afferent arterioles that originate from these terminal interlobular arteries.

Histologically, the kidney is composed of a basic structural unit known as the nephron. Each human kidney contains approximately 1 million nephrons. The nephron is composed of two major components: a filtering element composed of an enclosed capillary network (the glomerulus) and an attached tubule. The tubule contains several distinct anatomic and functional segments.

(from CECIL Essentials of Medicine 3rd edition by Thomas E. Anderoli, J. Claude Bennett, Charles C. J. Carpenter, Fred Plum and Lloyd H. Smith, Jr.)

New Words

vascular /'væskjələ/	<i>adj.</i> 血管的
bronchial /'brɒŋkiəl/	<i>adj.</i> 支气管的
nutritive /'nju:trɪtɪv/	<i>adj.</i> 营养的
alveolar /æl'vi:ələ(r)/	<i>n.</i> 小气泡
aorta /eɪ'ɔ:tə/	<i>n.</i> 主动脉
intercostal /,ɪntə'kɒstl/	<i>adj.</i> 肋间的
ventricle /'ventrɪkl/	<i>n.</i> 心室
Thebesian	特贝西乌斯的
shunt /ʃʌnt/	<i>v.</i> (使)分流
hilum (复 hila) /'haɪləm/	<i>n.</i> 门

predominantly /prɪ'dɒmɪnəntli/	<i>adv.</i> 占主导地位地; 显著地; 占优势地
periphery /pə'rɪfəri/	<i>adj.</i> 外周的
arteriole /ɑ:'tɪərɪəʊl/	<i>n.</i> 小动脉
capillary /kə'pɪləri/	<i>n.</i> 毛细血管
atrium /ɑ:'trɪəʊm/	<i>n.</i> 心房
anatomically /,ænə'tɒmɪklɪ/	<i>adv.</i> 在解剖学上
retroperitoneal /,reɪtrəʊ,perɪtə'ni:əl/	<i>adj.</i> 腹膜后隙的
approximately /ə'prɒksɪmətli/	<i>adv.</i> 近似地, 大约
medulla /me'dʌlə/	<i>n.</i> (拉丁语)骨髓
coronal /'kɒrənəl/	<i>adj.</i> 冠状的
cortex /'kɔ:teks/	<i>n.</i> 皮质
medulla /me'dʌlə/	<i>n.</i> 髓质
apices /'epɪ,sɪz/	<i>n.</i> (apex 的意数) 顶尖
papilla /pə'pɪlə/	<i>n.</i> 乳突
calyx /'keɪlɪks/	<i>n.</i> 盏
renal /'ri:nəl/	<i>adj.</i> 肾的
pelvis /'pelvɪs/	<i>n.</i> 肾盂
bladder /'blædə/	<i>n.</i> 膀胱
ureter /ju'reɪtə/	<i>n.</i> 输尿管
perpendicular /pɜ:pən'dɪkjələ/	<i>adj.</i> 垂直的, 成直角的
histologically	<i>adv.</i> [医]组织学上地, 组织结构上地
nephron /'nefrɒn/	<i>n.</i> 肾单位
glomerulus /gləʊ'merjʊləs/	<i>n.</i> (肾)小球
parenchyma /pə'reŋkɪmə/	<i>n.</i> 实质
arcuate /'ɑ:kjuət/ artery /'ɑ:təri/	弓状动脉
glomerula /gləʊ'merjʊlə/	<i>adj.</i> 肾小球的
afferent /'æfərənt/	<i>adj.</i> 传入的

Phrases & Expressions

drain into	流入
pulmonary arterioles	肺小动脉
pulmonary veins	肺静脉
lumbar vertebrae	腰椎
conical structures	锥形结构
pyramidal structures	金字塔结构
renal pelvis	肾盂
lobar arteries	肺动脉
renal parenchyma	[医]肾实质
interlobar arteries	叶间动脉
renal cortex	肾皮质
arcuate arteries	弓状动脉
corticomedullary junction	皮髓质结合
filtering element	过滤元件

Part 1 Questions 1 - 10

Read the text. Are sentences 1 – 10 “Right” or “Wrong”? If there is not enough information to answer “Right” or “Wrong”, choose “Not Mentioned”.

- The bronchial and pulmonary circulations supply blood for the lung.
A. Right B. Wrong C. Not Mentioned
- About one third of the venous effluent of the bronchial circulation drains into the pulmonary veins.
A. Right B. Wrong C. Not Mentioned
- After emptying into an extensive capillary network and draining into thin-walled pulmonary veins, the pulmonary arterioles eventually join with the arteries and bronchi at the hilum, then exit the lung to enter the left atrium.
A. Right B. Wrong C. Not Mentioned
- The human kidneys are anatomically positioned in the retroperitoneal space at level of the upper thoracic and lower lumbar vertebrae.
A. Right B. Wrong C. Not Mentioned
- A coronal section of the kidney reveals two distinct regions, the outer region and the

inner region.

A. Right B. Wrong C. Not Mentioned

6. The kidney is supplied with blood from a main renal artery.

A. Right B. Wrong C. Not Mentioned

7. The main artery usually divides into the upper, middle, and lower regions.

A. Right B. Wrong C. Not Mentioned

8. The terminal interlobular arteries provide blood for the glomerular capillaries.

A. Right B. Wrong C. Not Mentioned

9. The nephron is the basic structural unit of the kidney.

A. Right B. Wrong C. Not Mentioned

10. The nephron is composed of two major components: the glomerulus and afferent arterioles.

A. Right B. Wrong C. Not Mentioned

Part 2 Questions 11 - 15

Read the text again. For questions 11 – 15, choose the answer (A, B or C) which you think fits best according to the text.

11. Where does the bronchial circulation drain?

- A. The bronchial circulation drains into the systemic veins and back to the right ventricle.
- B. The bronchial circulation drains into the pulmonary veins.
- C. The bronchial circulation drains into the systemic veins and the pulmonary veins.

12. Which one is the correct order of blood flow?

- A. The left atrium—the arteries and bronchi at the hilum—an extensive capillary network and thin-walled pulmonary veins—the pulmonary arterioles.
- B. The pulmonary arterioles—an extensive capillary network and thin-walled pulmonary veins—the arteries and bronchi at the hilum—the left atrium.
- C. The pulmonary arterioles—the arteries and bronchi at the hilum—an extensive capillary network and thin-walled pulmonary veins—the left atrium.

13. Where are the human kidneys anatomically positioned?

- A. The human kidneys are anatomically positioned in the retroperitoneal space at level of the lower thoracic and upper bladder.
- B. The human kidneys are anatomically positioned in the retroperitoneal space at

level of the lower ureters and upper bladder.

C. The human kidneys are anatomically positioned in the retroperitoneal space at level of the lower thoracic and upper lumbar vertebrae.

14. Which one is the correct order of urine flow?

A. The renal pelvis—the ureters—the bladder.

B. The ureters—the renal pelvis—the bladder.

C. The renal pelvis—the bladder—the ureters.

15. What are the two major components of the nephron?

A. The glomerulus and an attached tubule.

B. Interlobular arteries and the glomerulus.

C. The glomerulus and an attached tubule.

Part 3 Questions 16 - 30

Fill in the blanks with the words or expressions given below. Change the forms where necessary.

bronchi	pulmonary	artery	vein	drain into
approximately	be located at	histology	subdivide	be composed of
originate	atrium	bladder	capillary	component

16. He had an operation last year to widen a heart _____.

17. The streams _____ the lake.

18. This medicine may relieve chest congestion and dry, _____ coughs.

19. Plant cells are _____ into several morphologically distinct compartments.

20. Smoking is one of the major reasons for a shocking rise in chronic _____ disease and lung cancer.

21. _____ studies on this kind of leaf have been making big progress.

22. Enriched uranium is a key _____ of a nuclear weapon.

23. Passengers on long-haul flights are being warned about the risks of deep _____ thrombosis.

24. A small community library _____ the university.

25. The urine from the _____ is simply not being transmitted to the outside.

26. His skin will flush, indicating that _____ are operating at full capacity.

27. Water _____ hydrogen and oxygen.

28. Both _____ are thin-walled muscular chambers.

29. All theories _____ from practice and in turn serve practice.

30. The journey took _____ seven hours.

Part 4 Questions 31 - 35

Read the following procedures. Choose from A – F the answer which fits each gap(31 – 35). There is one extra that you do not need to use.

How to identify the 4 major blood vessels in the dissection of alimentary canal of a rat?
To identify the blood vessels, you can perform some important steps first as follows.

Step 1

To cut mesentery connected between liver and stomach.

Move stomach on the right hand side of a rat.

Step 2

_____ 31 _____

Step 3

You can find that ileum is crossing the colon here.

To release the loop between ileum & colon.

Step 4

_____ 32 _____

Step 5

_____ 33 _____

To show hepatic portal vein connecting from ileum to liver.

Step 6

To trace the duodenum & ileum as a fan-like pattern.

Step 7

_____ 34 _____

Step 8

To clear & pin out the 3 major blood vessels.

Step 9

_____ 35 _____

Step 10

You are now finishing this dissection.

- A. Pink color pancreas is clearly found.
 B. To put caecum on the right foot of a rat.
 C. To cut off the tail.
 D. To find the posterior mesenteric artery near rectum.
 E. To peel off some pancreas.
 F. To identify 3 major blood vessels on the position first (Hepatic portal vein, Coeliac artery, Anterior mesenteric artery).

Part 5 Questions 36 - 45

Match the English words with their correct Chinese meanings according to these prefixes and suffixes.

Word Roots	Meanings	Examples
plum-	羽	plumatus 羽状的
foli-, foil-	叶	foiling 叶形
meso-	中, 中间	mesosphere 中圈, 中层
intra-, intro-, inter-	在内, 向内	intracellular(细)胞内的
centri-, centro-, medi-, mid-	中心, 中央, 中间	centrifuge 离心
epi-, peri-	上, 外, 旁	epidermal growth factor(EGF): 表皮生长因子
sub-, suc-, suf-, sug-	下, 低, 小	subclone 亚克隆
super-, supra-	上, 高, 超	superconductor 超导体
hydro-	水的	hydrocele 水囊肿
hypo-	低	hypokalaemia 低血钾

- | | |
|--------------------|----------|
| 36. plumule | A. 城市之间 |
| 37. foliage | B. 亚细胞的 |
| 38. mesoplast | C. 碳氢化合物 |
| 39. interurban | D. 绒毛 |
| 40. centriole | E. 皮下的 |
| 41. epibranchial | F. 叶子 |
| 42. subcellular | G. 中胚层质 |
| 43. supramolecular | H. 中心粒 |

44. hydrocarbon

I. 上鳃的

45. hypodermic

J. 超分子的

Writing

Write an abstract of medical history with the information given below.

请根据以下材料书写病历摘要。

68 岁男性于 2014 年 5 月 3 日因左股骨颈骨折入我院治疗。

入院检查:左髋部肿胀压疼,左下肢活动受限。X 线片显示左股头下部粉碎性骨折兼移位。建议行人工股骨头内修复置换术。经用药物及牵引治疗后症状减轻。

患者要求回国进一步治疗,因而安排定于明日出院。

Chapter Two



Listening

Part 1 Questions 1 - 5

- You will hear five patients describing their problems.
- What problem does each patient have?
- For questions 1 – 5, mark the correct letter A – H on your answer sheet.
- You will hear each conversation twice.

A. Sharp pain in upper abdomen

B. Fracture

C. Swelling legs

D. Cold

E. Pneumonia

F. Stomachache

G. Difficulty in breathing

H. Terrible headaches

Example :

Heath	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☒	☐	☐

1. Hook	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
2. Smith	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
3. Robinson	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
4. Hardy	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐
5. Howard	A	B	C	D	E	F	G	H
	☐	☐	☐	☐	☐	☐	☐	☐

Part 2 Questions 6 - 10

- You will hear a conversation between 2, or 3, or 4 persons (such as a patient and a nurse about health problems).
- For questions 6 – 10 ,decide if each sentence is correct or incorrect.
- If it is correct,put a tick(✓) in the box next to A for Yes. If it is not correct, put a tick(✓) in the box next to B for No.
- You will hear each conversation twice.

Example :

0 The patient will have an operation for gallstone.	A. Yes	☐
	B. No	☒

6. The patient has been suffering from diarrhea since last night.	A. Yes	☐
	B. No	☐
7. The doctor presses the patient's abdomen to make the diagnosis.	A. Yes	☐
	B. No	☐
8. The patient has suffered from the pain for three days.	A. Yes	☐
	B. No	☐
9. The patient will have to sign a consent paper before the operation.	A. Yes	☐
	B. No	☐
10. The patient had a fever last night.	A. Yes	☐
	B. No	☐

Part 3 Questions 11 - 15

- You will hear a conversation between 2, or 3, or 4 persons (such as a patient and a nurse about health problems).
- For questions 11 – 15 ,choose the correct answer A,B or C. Put a tick(✓) in the box.
- You will hear each conversation twice.

- | | | |
|------------------------------------|--|--------------------------|
| 11. The patient feels _____ | A. thirsty | ☐ |
| all the time. | B. exhausted | ☐ |
| | C. hungry | ☐ |
| 12. The patient suffers | A. vomiting | ☐ |
| from _____. | B. pain around the right side of his stomach | ☐ |
| | C. loss of appetite and weight loss | ☐ |
| 13. What is the patient's special | A. He likes to drink alcohol. | ☐ |
| dietary habit? | B. He likes to eat meat. | ☐ |
| | C. He likes to drink water. | ☐ |
| 14. The check-up two years ago | A. enlarged liver | ☐ |
| showed that the patient had | B. abnormal liver function | ☐ |
| _____. | C. both A and B | |
| 15. What's wrong with the patient? | A. Diabetes. | ☐ |
| | B. Chronic hepatitis. | ☐ |
| | C. Pancreatitis. | ☐ |

Part 4 Questions 16 - 20

- You will hear a doctor discussing with a patient about his condition.
- Listen and complete questions 16 – 20 on your answer sheet.
- You will hear the conversation twice.

Main symptom: A bad itch inside the nose accompanied by (16).

Other symptoms: Constriction in the chest, (17) and a running nose.

Frequency of fit: It occurred (18) in the past three years.

Allergic history: Sensitive to (19) and penicillin-type drugs.

Diagnostic conclusion: The patient suffers from (20).

Reading

A Case of Acute Cholecystitis

A 42-year-old male patient was admitted on September 21, 2014 through our emergency clinic because of right upper abdominal pain for 17 hours' duration.

He started to have the pain on September 20, 2014, soon after his supper. The pain was persistent in nature, gradually increased in severity and radiated to the right scapular region. He vomited once. No fever was noticed. He had had several similar attacks in the past.

Physical examination on admission: Mentally clear with distressing facial expression. Blood pressure 140/90 mmHg. Pulse rate 84/min. Body temperature 38.5°C. The sclera was not icteric. The heart and lungs were normal. The abdomen was flat with marked tenderness over the right upper quadrant, where muscular spasm and rebound tenderness were present. The liver was enlarged with its lower edge 2cm below the right costal margin. The spleen was not felt. The peristaltic sound was normal.

Laboratory examination. Hemoglobin 16.0 g%. White blood cell count 10,800/cu mm with a differential count of 82% neutrophils, 16% lymphocytes and 2% monocytes. Bleeding time 1 min. 30 sec. Coagulation time 30 sec. Routine examination of the urine was normal. Serum amylase 86 unit %. Blood bilirubin 1.3 mg % with direct portion of 0.5 mg %. SGPT, TTT and TFT were all normal. BUN 12.2 mg %. CO₂ combining power 55 vol. %. The blood group was AB and Rh factor negative.

ECG was normal.

Ultrasonic examination. Fluid waves of the gallbladder (at the depth of 3.0–4.5 cm) can be seen under the right costal margin along the mid-clavicular line, indicating enlargement of the gallbladder.

Fluoroscopy of the chest showed normal heart and lung. A plain film of the abdomen revealed nothing remarkable.

Clinical diagnosis: Acute cholecystitis with possible cholelithiasis.

After admission, he was put in fasting state. He was given intravenous glucose infusions together with intravenous administration of gentamycin, tetracycline and hypo injection of atropine. His general condition was improved. The abdominal pain gradually reduced in intensity and was almost entirely relieved 18 hours after admission. The temperature returned to normal 3 days after the commencement of treatment. He was discharged from the

hospital on September 28, 2014.

To avoid recurrent attacks later, it is advisable for him to have cholecystography done after he is back home and to receive further treatment accordingly.

New Words

acute /ə'kju:t/	<i>adj.</i> 急性的
cholecystitis /ˌkɒlɪsɪs'taɪtɪs/	<i>n.</i> 胆囊炎
abdominal /æb'dɒmɪnəl/	<i>adj.</i> 腹部的
duration /dʒʊə'reɪʃən/	<i>n.</i> 持续, 持续的时间
severity /sɪ'verɪtɪ/	<i>n.</i> 严重性
radiate /'reɪdiət/	<i>vt.</i> 辐射; 发射; 使向周围扩展
scapular /'skæpjələ/	<i>adj.</i> 肩的, 肩胛的
vomit /vɒmɪt/	<i>vt. & vi.</i> 呕吐
distress /dɪs'tres/	<i>n.</i> 悲痛
sclera /'skliərə/	<i>n.</i> 巩膜
icteric /ɪk'terɪk/	<i>adj.</i> 黄疸的
tenderness /'tendənɪs/	<i>n.</i> 触痛
quadrant /'kwɒdrənt/	<i>n.</i> 四分体
spasm /'spæzəm/	<i>n.</i> 痉挛; 抽搐
rebound /rɪ'baʊnd/	<i>n.</i> 反弹, 反跳
costal /'kɒstəl/	<i>adj.</i> 肋的
margin /'mɑ:dʒɪn/	<i>n.</i> 边缘, 范围
spleen /spli:n/	<i>n.</i> 脾
peristaltic /pə'rɪstæltɪk/	<i>adj.</i> 蠕动的
hemoglobin /ˌhi:məʊ'gləʊbɪn/	<i>n.</i> 血红素; 血红蛋白
differential /ˌdɪfə'renʃəl/	<i>adj.</i> 差别性的
neutrophil /'nju:trəfɪl/	<i>n.</i> 嗜中性粒细胞
lymphocyte /'lɪmfəsaɪt/	<i>n.</i> 淋巴细胞
monocyte /'mɒnəsaɪt/	<i>n.</i> 单核细胞
bleed /bli:d/	<i>vi.</i> 流血
coagulation /kəʊ,ægjʊ 'leɪʃən/	<i>n.</i> 凝血, 凝结
routine /ru:'ti:n/	<i>adj.</i> 例行的; 常规的
urine /'juərɪn/	<i>n.</i> 尿; 小便
serum /'sɪərəm/	<i>n.</i> 血清, 血浆

amylase /'æmɪleɪz/	<i>n.</i> 淀粉酶
bilirubin /ˌbɪlɪ'ruːbɪn/	<i>n.</i> 胆红素
portion /'pɔːʃən/	<i>n.</i> 部分
negative /'negətɪv/	<i>adj.</i> 阴性的
ultrasonic /'ʌltrə'sɒnɪk/	<i>adj.</i> 超声的; 超音波的
gallbladder /'gɔːlblædə/	<i>n.</i> 胆囊
clavicular /kleɪ'vɪkjələ/	<i>adj.</i> 锁骨的
fluoroscopy /flu(:)ə'rɒskəpɪ/	<i>n.</i> 透视检查术
cholelithiasis /kəʊlɪlɪ'θaɪəsɪs/	<i>n.</i> 胆石症; 胆结石
fasting /'fɑːstɪŋ/	<i>adj.</i> 禁食的
intravenous /ˌɪntrə'veɪnəs/	<i>adj.</i> 进入静脉的; 静脉注射的
glucose /'gluːkəʊs/	<i>n.</i> 葡萄糖
infusion /ɪn'fjuːʒən/	<i>n.</i> 注入, 输液
administration /ədˌmɪnɪs'treɪʃən/	<i>n.</i> 实行; 施行
gentamycin /'dʒentəmaɪsɪn/	<i>n.</i> 庆大霉素
tetracycline /ˌtetrə'saɪklɪn/	<i>n.</i> 四环素
atropine /ætrə'piːn/	<i>n.</i> 阿托品
intensity /ɪn'tensɪtɪ/	<i>n.</i> 强度
commencement /kə'mensmənt/	<i>n.</i> 开始; 开端
recurrent /rɪ'kʌrənt/	<i>adj.</i> 复发的, 复现的
cholecystography /ˌkɒlɪsɪs'tɒɡrəfi/	<i>n.</i> 胆囊造影术

Phrases & Expressions

white blood cell count 白细胞计数

differential count 差别计数

CO₂ combining power 血二氧化碳结合力

Proper Names

SGPT *abbr.* 血清谷丙转氨酶试验

TTT *abbr.* 麝香草酚浊度试验

TFT *abbr.* 麝香草酚絮状反应

BUN *abbr.* 血尿素氮

ECG *abbr.* 心电图

Part 1 Questions 1 - 10

Read the text. Are sentences 1 – 10 “Right” or “Wrong”? If there is not enough information to answer “Right” or “Wrong”, choose “Not Mentioned”.

1. The male patient was admitted through the emergency clinic because of the right lower abdominal pain.
A. Right. B. Wrong. C. Not mentioned.
2. The patient's pain was persistent and gradually radiated to the right scapular area.
A. Right. B. Wrong. C. Not mentioned.
3. The patient suffered from a high temperature.
A. Right. B. Wrong. C. Not mentioned.
4. Muscular spasm and rebound tenderness were present over the right upper quadrant.
A. Right. B. Wrong. C. Not mentioned.
5. The patient's spleen could be felt but his liver couldn't.
A. Right. B. Wrong. C. Not mentioned.
6. Ultrasonic examination helped decide the doctor's clinical diagnosis.
A. Right. B. Wrong. C. Not mentioned.
7. The blood group is a necessary indicator to diagnose the disease.
A. Right. B. Wrong. C. Not mentioned.
8. There was also something wrong with the patient's lungs.
A. Right. B. Wrong. C. Not mentioned.
9. Intravenous infusion and hypo injection were the main measures taken to relieve the signs of the patient.
A. Right. B. Wrong. C. Not mentioned.
10. It's necessary for the patient to have cholecystography done later.
A. Right. B. Wrong. C. Not mentioned.

Part 2 Questions 11 - 15

Read the text again. For questions 11 – 15, choose the answer (A, B or C) which you think fits best according to the text.

11. What is the possible style of the passage?
A. A nursing abstract of medical history.
B. A clinical abstract of medical history.
C. A clinical lab report.

12. What was the feature of the patient's abdominal pain?

- A. It was sharp and quickly got worse.
- B. It was mild and repeatedly happened.
- C. It was constant and radial.

13. What were those examinations done to the patient?

- A. They were routine tests of blood and urine, ECG and ultrasound examination.
- B. They were routine tests of blood, ECG, ultrasound examination and fluoroscopy.
- C. They were routine tests of urine and blood, ECG, ultrasonic and X-ray examinations.

14. Which examination showed the enlargement of the gallbladder?

- A. The laboratory examination.
- B. The ultrasonic examination.
- C. The X-ray examination.

15. How long did the patient stay in the hospital?

- A. For 3 days.
- B. For 5 days.
- C. For 7 days.

Part 3 Questions 16 - 30

Fill in the blanks with the words or expressions given below. Change the forms where necessary.

spasm	costal	peristaltic	serum	intensity
cholecystitis	abdominal	scapular	distress	icteric
gallbladder	clavicular	intravenous	commencement	infusion

- 16. Untreated _____ contains a set of 11 proteins called complement.
- 17. All applicants should be at least 16 years of age at the _____ of this course.
- 18. He fell down the stairs and resulted in _____ fracture.
- 19. _____ drug users are in a high-risk category for hepatitis C.
- 20. _____ is a state of extreme sorrow, suffering, or pain.
- 21. This company needs an _____ of new blood, that is, needs new employees to give it vigor.
- 22. The doctor found that the patient's _____ sound was normal and ruled out the possibility of bowel diseases.
- 23. Cholelithiasis may be associated with present or past episodes of either acute or chronic _____.