Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pre-Test**

Read questions and instructions carefully. All questions have only one correct answer.

**PART ONE: INTERPRETER PROTOCOL AND ETHICS**

1. Which of the following skills is **LEAST** important in interpreting?
	1. Memory
	2. Bilingualism
	3. Native accent
	4. Intelligence
2. A **source language** means:
	1. A native language spoken by the patient’s family
	2. An official language used in the patients country
	3. A language from which one translates/interprets
	4. A dead language which originated a modern one
3. As an interpreter you should:
	1. Never take notes, as it’s a violation of HIPAA privacy laws.
	2. Let everyone know that you will be taking notes and why.
	3. Never take notes, as people will think you have bad memory.
	4. Write down everything anyone states during the interview.
4. A patient asks you to drive them to the pharmacy around the corner to pick up their prescription. What should you do?
	1. Give the patient a free ride since you know he doesn’t have a car.
	2. Ask your coworker who is about to leave work to give him a ride.
	3. Tell the patient you cannot give them a ride and offer alternatives.
	4. Offer to give him a ride for a fee, since gas is so expensive now.
5. You just interpreted for a woman who received the results of a biopsy. You run into the woman’s daughter in the hallway, who recognizes you as her mother’s interpreter and asks how the appointment went. You should:
	1. Say everything went very well and that her mom is doing great.
	2. Tell her that you are not allowed to disclose any results at the moment.
	3. Politely ignore her and keep walking to your next appointment.
	4. None of the above.
6. If a patient uses a term that the interpreter has never heard, the interpreter should:
	1. Skip the unknown term and continue interpreting.
	2. Take a guess based on the context and move on.
	3. Ask her to repeat what she said using different words.
	4. Let the doctor know you need to ask for clarification.
7. The interpreter may give medical advice:
	1. In a limited way, under certain circumstances.
	2. When a doctor explicitly requests her to do so.
	3. When a patient explicitly asks for medical advice.
	4. Never, under any circumstances whatsoever.
8. Which of the following form part of the medical interpreter’s role?
	1. Repeating a message spoken in one language in another language without adjusting the register or losing the meaning.
	2. Providing the listener with cultural information to facilitate understanding.
	3. Checking to see if a patient understood the instructions the doctor just gave.
	4. All of the above.
9. Which of the following is NOT a part of the interpreter’s role?
	1. Providing a doctor with cultural information that will help her understand what the patient just said.
	2. Interpreting for a family member who has accompanied the patient to his appointment and does not understand English.
	3. Helping the patient decide which treatment option is best.
	4. Informing the patient about his rights within the system.
10. You have been interpreting for a patient in nephrology who is on the list for a kidney transplant. After the appointment, the doctor asks whether you think the patient will be able to manage all medications involved in post-transplant care. What should you do?
	1. Tell the doctor that you have to think about it some more.
	2. Tell the doctor what you honestly think, so as to be respectful.
	3. Say yes, otherwise the doctor may take the patient off the transplant list.
	4. Explain to the doctor that you cannot speak on behalf of the patient.
11. What should you do if you realize that you have made a mistake in interpreting the patient’s symptoms to the doctor?
	1. Keep going, as correcting yourself would only cause confusion.
	2. Add the correct information to the interpretation without intervening.
	3. Let patient and provider know you made a mistake and explain the correction.
	4. At the end of the session tell the doctor that you made a little mistake.
12. Is literal (word-for-word) interpretation always the best interpretation?
	1. Yes; an interpreter’s job is only to give a literal interpretation.
	2. No; at times the interpreter needs to change embarrassing words.
	3. No; a literal interpretation doesn’t always convey the meaning.
	4. Yes; a literal interpretation is always very elegant and accurate.
13. The doctor tells the patient that his test results were negative but the doctor is not sure what is causing the patient’s frequent fevers. The patient responds very angrily. How will you interpret his response?
	1. Interpret the patient’s words in a calm voice; the doctor can see he is angry.
	2. Interpret just the patient’s words, but tell the doctor that he is very angry.
	3. Ask the patient if he really wants you to interpret that offensive message.
	4. Interpret the patient’s message slowly in a moderately angry tone of voice.
14. The diabetes educator is explaining to the patient how to use a glucometer. You sense from the patient’s body language that she does not understand what the instructor is saying. What should you do?
	1. Just keep interpreting because that is what you get paid to do.
	2. Explain to the patient how to use the glucometer so she gets it.
	3. Tell the educator you would like to check if the patient understood.
	4. Tell the diabetes educator that the patient did not understand.
15. When is it appropriate for an interpreter to intervene in a session?
	1. When based on observation you believe that the patient does not understand.
	2. When you notice that the patient is getting somewhat upset with the provider.
	3. When you see the provider getting frustrated due to patient’s attitude.
	4. When the patient starts to tell a long story that you know is not relevant.
16. Where should the interpreter stand during a routine medical interview?
	1. Beside the provider, in front of the patient.
	2. Between patient and provider, forming a triangle.
	3. Beside the patient, in front of the provider.
	4. Behind a curtain, to respect the patient’s privacy.
17. Which of the following situations is an example of **unprofessional** conduct?
	1. The medical terminology is too difficult for you, so you withdraw.
	2. You are late for your next appointment, so you withdraw.
	3. It turns out the patient is a family member, so you withdraw.
	4. Patient and provider feel they can communicate well in English, so you withdraw.
18. You just had a very upsetting interpreted session, in which one of your patients was told that her baby has a serious disease and will not live long. You feel terrible. Which of the following is an appropriate action to take to feel better?
	1. Invite the patient to your home for dinner to show support.
	2. Talk to your supervisor or a professional counselor about it.
	3. Organize a support group for the mother and attend yourself.
	4. Continue as if nothing had happened; you are a professional.
19. The doctor has left the room after discussing several possible treatment options with the patient. The patient turns to you and asks which one they should choose. Which of the following is the most appropriate action to take?
	1. Explain to the patient that you are only there to help him communicate with the doctor and cannot give him advice regarding treatment.
	2. Advise the person based on your understanding of their situation and the doctor’s description of each option.
	3. Politely tell the patient that you cannot help him right now because you need to go to another appointment.
	4. Try and find the doctor so you can obtain more information regarding each treatment option.
20. The LEAST intrusive role, the one that medical interpreters should strive to stay in most of the time is that of the:
	1. Culture Broker
	2. Advocate
	3. Bridge
	4. Conduit
21. A particular doctor has a habit of delivering patient instructions very quickly and in a manner that is sometimes difficult to hear clearly. You think you are familiar with the instructions and protocols they are discussing, even if you can’t make out everything the doctor is saying. You should:
	1. Just summarize everything for the patient after the doctor leaves.
	2. Explain the instructions to the patient as best as you can from what you remember.
	3. Make a note to follow up with the patient after you have had a chance to look up more information regarding the doctor’s instructions.
	4. Ask the doctor to repeat anything you cannot hear clearly so you may interpret it accurately for the patient.

**PART TWO: MEDICAL TERMINOLOGY**

1. Which term means the opposite of distal?
	1. Proximal
	2. Inferior
	3. Superior
	4. Ventral
2. Which term means a sticking together of two structures that are normally separated?
	1. Abdominocentesis
	2. Adhesion
	3. Laparogastrotomy
	4. Mucosa
3. Which glands are ductless and therefore secrete their hormones into the bloodstream?
	1. Endocrine
	2. Exocrine
	3. Salivary
	4. Sudoriferous
4. Which term means belly side?
	1. Lateral
	2. Ventral
	3. Posterior
	4. Superior
5. What is the term for the fluid part of the blood?
	1. Intracellular
	2. Lymphatic
	3. Plasma
	4. Thrombosis
6. Which term means inflammation of the vertebrae?
	1. Carpitis
	2. Phalangitis
	3. Spondylitis
	4. Tarsitis
7. What is the meaning of articulation?
	1. Joint
	2. Bone
	3. Cartilage
	4. Fascia
8. The doctor tells the patient she has pneumonia. What is another name for her diagnosis?
	1. Congestive heart disease
	2. Pneumonitis
	3. Pulmonary edema
	4. Pulmonary insufficiency
9. John is told he has periodic absence of breathing, also known as:
	1. Apnea
	2. Dyspnea
	3. Hyperpnea
	4. Hypopnea
10. What is the serous membrane that lines the walls of the thoracic cavity?
	1. Emphysema
	2. Menorrhea
	3. Pleura
	4. Thrombus
11. Which of the following is another term for inspiration?
	1. Exhalation
	2. Homeostasis
	3. Inhalation
	4. Pertussis
12. This term means inflammation of the air-filled cavities in various bones around the nose:
	1. Laryngitis
	2. Pleuritis
	3. Tracheitis
	4. Sinusitis
13. Which specialist should a patient with colon problems see?
	1. Cardiologist
	2. Gastroenterologist
	3. Gynecologist
	4. Urologist
14. Linda was diagnosed as having self-induced starvation. Name her disorder.
	1. Anorexia
	2. Aphagia
	3. Malaise
	4. Polyphagia
15. Unless there is intervention for Linda, she could develop which condition?
	1. Emaciation
	2. Atresia
	3. Adipsia
	4. Volvulus

37-47. Instructions: Column I contains the major systems of the human body. Column II contains the main functions of each system. For each system in Column I, select the correct function from Column II. Record your choice on the line preceding the question number. Each answer may be used only once.

Column II

1. Coordinates the reception of stimuli; transmits messages to stimulate movement
2. Secretes hormones and helps regulate body activities
3. Brings oxygen into the body and removes carbon dioxide and some water waste
4. Makes movement possible
5. Provides the body with water, nutrients and minerals; removes solid wastes
6. Facilitates procreation
7. Provides protection, form and shape for the body
8. Helps maintain the internal fluid environment; regulates immunity
9. Delivers oxygen, nutrients and other substances throughout the body; transports cellular waste products to the lungs and kidneys for excretion
10. Filters blood to remove wastes of cellular metabolism; maintains balance of fluids
11. Provides external covering for protection; regulates body temperature

Column I

\_\_\_\_ 37. Muscular system

\_\_\_\_ 38. Skeletal system

\_\_\_\_ 39. Cardiovascular system

\_\_\_\_ 40. Lymphatic system

\_\_\_\_ 41. Respiratory system

\_\_\_\_ 42. Digestive system

\_\_\_\_ 43. Urinary system

\_\_\_\_ 44. Reproductive system

\_\_\_\_ 45. Integumentary system

\_\_\_\_ 46. Nervous system

\_\_\_\_ 47. Endocrine system

48-60. Instructions: Column I contains medical terms in English. Column II contains medical terms in Spanish. For each English term in Column I, select the Spanish term from Column II that represents the best translation. Record your choice on the line preceding the question number. Each answer may be used only once. Keep in mind that you will not use all of the choices available in Column II.

Column I Column II

\_\_\_\_ 48. Fibula A. Axila

\_\_\_\_ 49. Cough B. Estornudo

\_\_\_\_ 50. Tinnitus C. Sopor

\_\_\_\_ 51. Chicken pox D. Acidez

\_\_\_\_ 52. Calf E. Tos

\_\_\_\_ 53. Tweezers F. Cálculo biliar

\_\_\_\_ 54. Underarm G. Peroné

\_\_\_\_ 55. Wart H. Ceja

\_\_\_\_ 56. Eyelid I. Pinzas

\_\_\_\_ 57. Gallstone J. Pantorrilla

\_\_\_\_ 58. Intoxicated K. Verruga

\_\_\_\_ 59. Heartburn L. Varicela

\_\_\_\_ 60. Drowsiness M. Talón

N. Zumbido de oídos

O. Ebrio

P. Párpado