



TEACHER'S NOTES

MINOR ILLNESSES

Age: Adult

Level: Pre-intermediate +

Time: 60 minutes

Activity: In this lesson, students will:

- review vocabulary related to illness, injury and treatment;
- 2. identify useful language in example conversations between a doctor and a patient;
- 3. take part in a doctor-patient role-play task.

Language focus: Vocabulary related to illness, injury and treatment

Materials: One copy of the worksheet per student; one transcript per student; the listening and something to play it from

PROCEDURE

Exercise 1

Students discuss the introductory questions in pairs. These orientate learners to the topic and activate prior knowledge related to visiting the doctor.

Exercise 2

a. This exercise provides learners with a model conversation for the final task – a doctor-patient role-play. Students listen and make notes in the box to answer each question.

Key:

Patient name	Sarah			
Symptoms	Pain, swollen finger			
Cause	A football injury – she tried			
	to save a shot and the ball			
	bent her finger backwards			
Injury/Illness	Sprained finger			
Recommended treatment	Rest, painkillers if needed			
Other details	Students' own ideas.			
	Suggestion: It should take			
	around one to two weeks			
	to heal			

b. This is a chance for learners to listen in more detail to the text. They listen and answer the questions true or false. As an extension, you could encourage learners to correct the false statements.

Key:

- 1. True (the doctor says 'is this another football injury?')
- 2. True (Sarah has applied ice and rested it)
- 3. False (the swelling has gone down)
- 4. False (the doctor says that Sarah needs to rest it)

Exercise 3

- **a.** This activity provides students with a chance to practise for the final task. Instruct students to practise the conversation with a partner twice, changing roles each time.
- **b.** This activity draws students' attention to useful language for the final task. Instruct students to scan the transcript and identify questions and the softening language used by the doctor.

Key (possible answers):

Useful questions that the doctor asks:

How are things?

What seems to be the problem?

... can I take a look at the finger?

Does that hurt?

How have you treated the finger since Saturday?

... has the swelling gone down?

Have you taken anything for the pain?

Language the doctor uses to soften the problem and put the patient at ease:

Please, take a seat.

Oh dear, I can see you're in a bit of pain.

I can see your finger is quite swollen.

I don't think there's anything to worry about ...

I'm afraid not ...

Pronunciation

This activity draws attention to the doctor's tone of voice. As learners listen to the conversation, pause the recording after one of the above phrases. Learners try to copy the doctor's tone and pitch. Alternatively, you could model these phrases yourself in isolation from the text.





TEACHER'S NOTES

Dealing with tone of voice

It can be difficult to teach 'tone' to learners – teachers can tend to exaggerate certain features of tone, which can result in the model for learners being too animated, inauthentic, and even display a different emotion to the one intended (often sarcasm!).

General guidance for modelling a soft tone of voice would be: speak slowly, speak a little more quietly than usual and vary your intonation to show interest.

- Start by focusing on the speaker's emotions. Draw learners' attention to these emotions or feelings within the context. Instruct learners to display these emotions through body language, such as facial expressions. In this context, you will notice learners may show concern or worry.
- Then you can explore aspects of the voice based on the emotions:

If you are worried about someone, would you speak to them in a raised (loud) voice? **No.**

Would you speak very quickly? No.

How might they feel if you speak very quickly at them? (teacher provides an example) They might feel more anxious or feel there is a sense of urgency.

Would you speak with the same tone, like this? (models a monotone voice) No.

Why not? It doesn't sound like you're interested, or you care.

etc

Making it fun

You could encourage the learners to correct each other's use of soft tone. Short dialogues might help. Students work in pairs. Student A practises saying one of the phrases to Student B. If Student B feels that Student A used a soft tone and sounded sympathetic, they respond positively. If not, they respond negatively. Example:

Student A: What seems to be the problem? (said in a monotone voice)

Student B: You don't care!

Student A: I do, I promise. Please, tell me. What seems to be the problem? (exaggerated too much)

Student B: *Hmm, I think I might see another doctor about this ...*

Student A: Wait, wait! What seems to be the problem? (correct)

Student B: Thanks for caring, Doctor, well ...

The success of this approach depends on whether your learners feel confident enough to improvise!

Exercise 4

This activity helps learners to prepare for the final task. It provides them with possible language to use, and in turn may also serve to upgrade their language in this topic area.

a. First, learners add phrases connected to the listening into the correct part of the table. If you feel that learners may be unsure about some concepts here (e.g. diagnose), you can work through this stage together.

Key:

Injury	Treatment
sprained finger	ice it
	rest
Illnesses and symptoms	Ways to diagnose
	an injury/illness
swollen (adj) / swelling (n)	examine it
pain	

b. In this stage, learners are given more vocabulary to categorise. They can try to use some of this in their own dialogues, and they can also add any further vocabulary they know to the table.

Key (possible answers):

Injury	Treatment
broken finger	take medicine
bruised arm	apply cream
cut	keep it elevated
stubbed toe	put a plaster on it
sprained ankle	wrap a bandage around it





TEACHER'S NOTES

MINOR ILLNESSES

Illnesses and symptoms	Ways to diagnose an			
	injury/illness			
cold	do a blood test			
fever	check vital signs (vitals)			
stomach ache				
toothache				
migraine				

Weaker classes may be unfamiliar with some of the terms here, such as 'swollen', 'bruised' or 'elevated'. Encourage students to ask each other to define new vocabulary, or to look online or in a dictionary. If they are still unsure, they can always ask the teacher.

Pronunciation

Drill each term. Possible difficulties include:

- The /ɪd/ ending in 'elevated'
- The pronunciation of 'ache' (/eɪk/) and 'migraine' (/ˈmaɪqreɪn/)
- Elision in 'stubbed toe'
- Final consonant and initial vowel linking in phrases such as 'sprained ankle', 'keep it ...', etc.

Difficulties may vary depending on context. It would be best for the teacher to consider the pronunciation difficulties their own learners might have in relation to these phrases.

Suggestion - add a game

You may wish to consolidate this vocabulary with an additional game stage. This will give learners a chance to practise the pronunciation of each phrase, and ensure they understand each term. You could try:

Mime – One student mimes a phrase in the table and other students guess what the phrase is.

Mime, Draw, Describe – One student either mimes a phrase to their team mates, draws the phrase, or describes it (in English!). This can be made into a class competition.

c. Students discuss the questions relating to the phrases in the table.

Key:

- 1. Students' own experience
- 2. Students' own ideas
- 3. The vital signs a doctor checks generally include temperature, blood pressure, pulse and breathing rate.

Exercise 5

This is the final task, which gives learners the opportunity to use language from the model conversations through role-play. Assign students roles, either doctors or patients. Give patients time to decide which injury or illness they have. During this time, doctors can review the useful vocabulary in preparation for the role-play. When everyone is ready, pair a doctor with a patient, and instruct them to perform a conversation like in the listening activity.

Note: Reassure students that they do not have to do a physical examination on body parts(!) – this can just be imagined.

When each pair finishes, offer feedback on use of the target language, upgrade language where needed, and then change pairs. Students can repeat this task multiple times, and can change roles as required / time allows.

When students finish, group the patients and doctors together. They discuss the questions (as mentioned in the role-play information on their handout). Discuss their reflections briefly as a class.

Reflection (optional)

To wrap up the lesson, you may wish for students to discuss some reflection questions such as these:

- How well do you think you completed the role-play task?
- What could you do to improve your performance next time?
- What new language have you learnt from today's lesson?
- How useful was this language to your own context / situation?





WORKSHEET

EXERCISE 1

Work with a partner. Discuss the questions.

- 1. What is healthcare like in your country?
- 2. Would you say you're fit and healthy? Why / Why not?
- **3.** What happens during a typical visit to the doctor's?

EXERCISE 2

a. You will hear a doctor talking with a patient. Complete the information in the table.

Patient name	
Symptoms	
Cause	
Injury/Illness	
Recommended treatment	
Other details	

- b. Decide if each statement is true (T) or false (F). Listen again and check.
 - 1. Sarah has visited the doctor before with an injury from a football match.
 - 2. Sarah has already tried to treat the injury.
 - **3.** Sarah's injury is worse now than it was on Saturday.
 - 4. Sarah will be able to play in the cup semifinal.

EXERCISE 3

- a. Work with a partner. Your teacher will give you the transcript. Practise the dialogue.
- **b.** Look through the transcript with a partner. Identify:
 - any questions that the doctor asks;
 - any language the doctor uses to soften the problem and put the patient at ease.

Pronunciation

Doctors are usually sympathetic and caring. Listen to the conversation again. Pause the recording after you hear a question or language to soften the problem. Try to copy the doctor's tone and pitch.





WORKSHEET

EXERCISE 4

a. Add the phrases connected to the listening to the correct part of the table.

examine it	finger	ice it	pain	rest	sprained	swollen (adj) / swelling (n)
------------	--------	--------	------	------	----------	------------------------------

Injury	Treatment
Illnesses and symptoms	Ways to diagnose an injury/illness

b. Add the phrases in the box to the correct part of the table.

apply cream	broken finger bruised arm		m chec	check vital signs (vitals)			cut	
do a blood test	fever	keep i	keep it elevated		migraine put a plaster		sprained ankle	
stomach ache	stubbed toe take		take medi	cine to	othache	wrap a bai	ndage ar	ound it

c. Work with a partner. Discuss the questions.

- 1. Which of the injuries, illnesses or symptoms have you had before?
- 2. What do you think is a good treatment for each injury or illness?
- 3. What are the 'vital signs' that doctors check?

EXERCISE 5

Your teacher will give you a role. Listen to their instructions.

Student A: You are a patient. Choose an illness or injury from the table in Exercise 4 or use your own idea. Visit each doctor to discuss your problem. Which doctor was the most helpful?

Student B: You are a doctor. Listen to each patient's problem. Ask questions to find out more about their problem. Offer advice or suggest treatments to each patient. Which patient was the most difficult to deal with?





TRANSCRIPT

Doctor: Hi Sarah. Please, take a seat.

Sarah: Hi Doctor, thanks. **Doctor:** How are things?

Sarah: Not so good actually.

Doctor: Oh dear, I can see you're in a bit of pain. What seems to be the problem?

Sarah: It's my finger. I think it might be broken ...

Doctor: Oh ... OK. I can see it looks swollen. Is this another football injury?

Sarah: Yes. I was playing in goal on Saturday. I tried to stop a shot but it bent my finger backwards.

Doctor: Ooh, sounds painful! OK, can I take a look at the finger? Can you rest your hand on the table for me? Just here.

Sarah: OK.

Doctor: OK ... I can see your finger is quite swollen. I'll just check if there's a break.

Sarah: Okay ...

Doctor: Does that hurt?

Sarah: A bit, yeah.

Doctor: How about this?

Sarah: Not really.

Doctor: Here?

Sarah: Oooof yeah, but ... it's not *really* painful. It hurts though.

Doctor: Hmm. I don't think your finger is broken. It's just sprained, but it does look painful. How have you treated the

finger since Saturday?

Sarah: Just the usual – ice, rest ...

Doctor: And has the swelling gone down?

Sarah: Well, maybe a little bit. But it's only been two days I guess ...

Doctor: Have you taken anything for the pain? Painkillers, or anything?

Sarah: No ...

Doctor: OK. Well, I don't think there's anything to worry about, Sarah. A sprain like this normally heals itself in a week or two, maybe slightly longer. You were right to get it checked out in case it was broken, but I think you're fine.

Just rest it, take a painkiller if you need it, but other than that ... it should get better on its own.

Sarah: OK, thanks. Do you think I'll be able to play in goal on Saturday?

Doctor: I'm afraid not, no.

Sarah: But it's the cup semifinal!

Doctor: Sarah, no. Rest it.

Sarah: OK, Doctor.