

Mrs Miller has come to see her local nurse about the recent headaches she's been having.

Transcript		
Mrs Miller:	I seem to be getting a lot more migraines recently.	
Nurse:	Right. When you say migraines, do you mean you get bad headaches or do you mean a doctor has diagnosed you as suffering from migraines?	
Mrs Miller:	I get very bad headaches. But I know what the symptoms of migraine are and I get a lot of them.	
Nurse:	So what you're saying is that it's different to bad headaches?	
Mrs Miller:	Yes.	
Nurse:	So, what happens when you get a migraine?	
Mrs Miller:	Well, it usually starts off with me feeling slightly off when I wake up in the morning. I'm very sensitive to strong smells and bright lights. Then, as the day goes on, the headache develops.	
Nurse:	How would you describe the pain?	
Mrs Miller:	At first it's pretty mild, like a scraping pain over my left eye and I get a pain in my neck also.	
Nurse:	Is that on the left side also?	
Mrs Miller:	Yes. It's a really tight pain, like my neck is being gripped. After a while the pain over my left eye gets more and more intense and it's very persistent.	
Nurse:	So, it starts off as a scraping pain over your left eye, extends down your neck and gets more intense after a while?	
Mrs Miller:	Yes.	
Nurse:	How long does it last?	
Mrs Miller:	Well, if I catch it in time, about 12 hours, but sometimes they can last for at least three days if I don't.	
Nurse:	What do you mean catch it in time?	
Mrs Miller:	Well, I take some very strong pain killers and they seem to stop it from getting worse. But only if I take them very early on. The only thing is that they tend to make me feel quite drowsy.	
Nurse:	Are the painkillers on prescription?	
Mrs Miller:	No. They are tablets that the pharmacist recommended.	
Nurse:	And how often do you get these pains?	
Mrs Miller:	Practically every week at the moment.	
Nurse:	They must be really difficult to cope with.	
Mrs Miller:	Yes, they really get me down.	
Nurse:	When did you start getting them?	
Mrs Miller:	They started about five years ago, but at first I just got the odd one.	



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Nursing lessons / Pain assessment / Intermediate



Nurse:	Do you have any idea what triggers them?		
Mrs Miller:	Not really. I've been keeping a record but I can't pinpoint what sets them off.		
Nurse:	Well, as you probably know, there are different triggers for migraine: dietary, environmental and behavioural. In terms of food, the main culprits are wine, chocolate, cheese as well as coffee, so maybe you need to look at whether that might be a factor.		
	Also strong smells and bright lights can set it off, as you seem to be experiencing.		
Mrs Miller:	They definitely can trigger it.		
Nurse: And you might want to think about any changes in your day-to-day routine, such as less sleep or working more. These can cause stress, which can also be a factor in on. I'll give you a leaflet on techniques to help you relax and also a leaflet on migrately you which foods to avoid.			
Mrs Miller:	Thanks. That sounds useful.		

Podcast: Intermediate

Pain assessment by Marie McCullagh & Ros Wright



A Note taking

- 1. As you listen, write T (true) or F (false) next to the statements below.
- a. The headaches tend to start in the evening.
- b. The patient is very sensitive to strong smells and bright lights.
- c. The patient also gets a pain in her shoulders.
- d. The headaches always last up to 12 hours.
- e. The painkillers are non-prescription drugs.
- f. The patient is able to identify the cause of the migraines.

2. Listen to the dialogue again and make notes under the following headings.

Characteristics	Notes
Type of pain	
Intensity	
Onset (starts, first started, possible triggers)	
Duration	
Location	

3. The nurse uses two types of questions in the dialogue, closed and open. Closed questions restrict the possible answers that can be given. Open questions allow any answer to be given. Look at the two examples below and decide which is the open and which is the closed question.

1 Nurse: So what you're saying is that it's different to bad headaches?

2 Nurse: So, what happens when you get a migraine?

Listen to the dialogue again and try to find more examples of open and closed questions. Use the transcript to check your answers and to identify any others.

B Colloquial language

1. The patient uses a number of colloquial expressions. Match the phrases to the definition.

- 1. feeling slightly off
- 2. pretty mild
- 3. to feel quite drowsy
- 4. to pinpoint
- 5. the odd one
- 6. set it off
- 7. bring it on
- 8. get me down

- a. to make one miserable
- b. not being your usual self
- c. to trigger
- d. to be sleepy
- e. not intense
- f. cause
- g. occasional
- h. to identify





C Communication focus

In each of the sentences below the nurse is trying to achieve one of the following objectives:

- a) confirm what the patient is saying
- b) clarify what the patient is saying
- c) summarise what the patient is saying

Match the objective with the sentence.

- 1. Nurse: What do you mean catch it in time?
- 2. Nurse: So, what you're saying is that it's different to bad headaches?
- 3. Nurse: So, it starts off as a scratching pain over your left eye, extends down your neck and gets more intense after a while?

D Follow-up

Your teacher will give you a card. You will need to fill in the missing words from your research on the follow-up in Part A.

With a partner, take it in turns to play the part of nurse and patient. As the nurse you will need to ask the patient what their pain symptoms are and make a note of them.

Patient 1 (Cardiac arrest)

Characteristics	Patient 1 (Cardiac arrest)	
Type of pain	?	
Intensity	severe	
Onset (first started)	five hours before he/she was admitted	
Duration	intermittent - lasting 10-15 minutes	
Location	?	

Patient 2 (Pleurisy)

Characteristics	Patient 2 (Pleurisy)	
Type of pain	?	
Intensity	intense	
Onset (first started)	three days before admitted	
Duration	persistent	
Location	?	

E Optional activity: Pronunciation

Group the following words under the correct word stress pattern.

	trigger	prescri			ensitive .	migraine	
	dietary	symptoms	record	pharmacist	scraping	culprits	
••			•••		•••		





ANSWER KEY

A Professional usage

- 1.
- a. F
- b. T
- c. F
- d. F
- e. T
- f. F

2.

Characteristics	Notes
Type of pain	scraping, tightness in neck
Intensity	mild → intense
Onset (starts, first started, possible triggers)	starts gradually; first started: 5 years ago; possible triggers: strong smells, bright lights, dietary, environmental, behavioural factors
Duration	12 hours \rightarrow 3 days
Location	over left eye, radiates to neck

3. Question types

1 Nurse: So what you're saying is that it's different to bad headaches? - Closed

2 Nurse: So, what happens when you get a migraine? - Open

Right. When you say migraines do you mean you get bad headaches or do you mean a doctor has diagnosed you as suffering from migraines?	closed
So what you're saying is that it's different to bad headaches?	closed
So, what happens when you get a migraine?	open
How would you describe the pain?	open
Is that on the left side also?	closed
So, it starts off as a scraping pain	closed
How long does it last?	closed
What do you mean catch it in time?	open
Are the painkillers on prescription?	closed
And how often do you get these pains?	closed
When did you start getting them?	closed
Do you have any idea what triggers them?	open

B Colloquial language

- 1. b
- 2. e
- 3. d
- 4. h
- 5. g
- 6. c
- 7. f 8. a





ANSWER KEY

C Communication focus

- 1. b
- 2. а
- 3. c

D Handover

Characteristics	Patient 1 (Cardiac arrest)	Patient 2 (Pleurisy)
Type of pain	crushing, radiating	intense
Intensity	severe	intense
Onset (first started)	five hours before he/she was admitted	three days before admitted
Duration	intermittent - lasting 10 -15 minutes	persistent
Location	left side of chest	chest - lungs

E Optional activity

••	•••	•••
migraine, trigger, drowsy, symptoms, culprits, scraping, record (n)*	pharmacist, sensitive, dietary	prescription

*point out to students that the word *record* when used as a verb has a different word stress. The main stress falls on the second syllable. ●●

