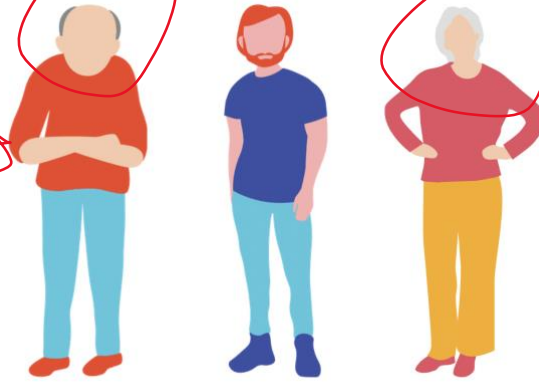


Today:

1. Differences game
2. What is Paragraph Function?
3. Linguistic features of paragraph function

Game: How many differences can you see between the people?



1

2

3

We can differentiate these people in terms of:

Gender

Age

Colour

Position

Attitude

Clothes

What do try to differentiate in Reading Part A?

texts

Questions 7-13
 Complete each of the sentences, 7-13, with a word or short phrase from one of the texts. Each answer may include words, numbers or both.

Patients at increased risk of tetanus:

- 7 If a patient has been touching _____ or earth, they are more susceptible to tetanus.
- 8 Any _____ lodged in the site of an injury will increase the likelihood of tetanus.
- 9 Patients with _____ fractures are prone to tetanus.
- 10 Delaying surgery on an injury or burn by more than _____ increases the probability of tetanus.
- 11 If a burns patient has been diagnosed with _____ they are more liable to contract tetanus.
- 12 A patient who is _____ or a regular recreational drug user will be at greater risk of tetanus.

- 3 ways to separate these:
- 1 Main Idea ✓✓✓✓
 - 2 Key Words ✓✓✓✓
 - 3 Function ✓

What is paragraph function?

What the paragraph is DOING / the action of the paragraph (for the reader)

Example:

<p style="text-align: center;">Main idea: transfusion</p> <p>Only in <u>1901</u>, when the Austrian Karl Landsteiner discovered three human blood groups (O, A, and B), did blood transfusion achieve a scientific basis and become safer.</p> <p>Landsteiner discovered that adverse effects arise from mixing blood from two incompatible individuals. He found that mixing incompatible types triggers an immune response and the red blood-cells clump. The immunological reaction occurs when the receiver of a blood transfusion has antibodies against the donor blood-cells. The destruction of red blood cells releases free hemoglobin into the bloodstream, which can have fatal consequences. Landsteiner's work made it possible to determine blood group and allowed blood transfusions to take place much more safely. For his discovery he won the Nobel Prize in Physiology and Medicine in <u>1930</u>; many other blood groups have been discovered since.</p> <p style="text-align: right;">Function: Information (history of transfusion)</p>	<p style="text-align: center;">Main idea: transfusion</p> <ul style="list-style-type: none"> • Avoid unnecessary and inappropriate transfusions. • Preventable 'wrong blood into patient' incidents are nearly always caused by human error and may cause fatal reactions due to ABO incompatibility. • The identity check between patient and blood component is the crucial final opportunity to avoid potentially fatal mistransfusion. • At every stage of the blood administration process the key elements are positive patient identification, excellent communication and good documentation. These can be enhanced by the use of electronic transfusion management systems and barcode technology. • Hospitals should develop local transfusion policies based on national guidelines and ensure all staff involved in the clinical transfusion process are appropriately trained and competency assessed. • Where possible, patients should give 'valid consent' for transfusion based on appropriate information and discussion, but signed consent is not a legal requirement. <p style="text-align: right;">Function: Guidelines</p>
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Example 2:

Diabetes is a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar), which leads over time to serious damage to the heart, blood vessels, eyes, kidneys and nerves. The most common is type 2 diabetes, usually in adults, which occurs when the body becomes resistant to insulin or doesn't make enough insulin.

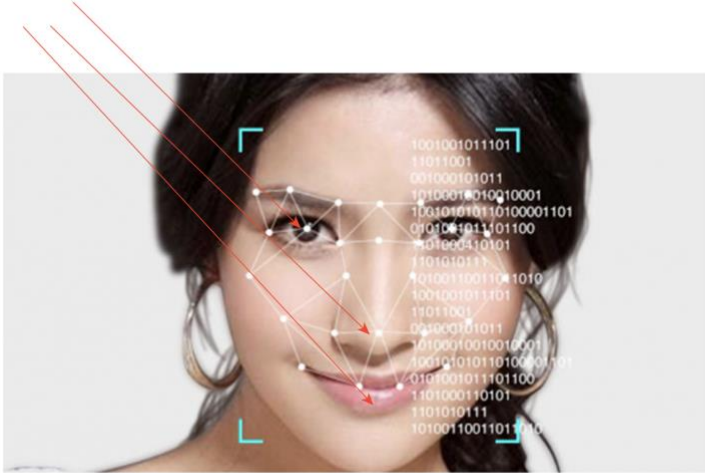
Main idea: diabetes
Function: definition



Hypertension, also known as high or raised blood pressure, is a condition in which the blood vessels have persistently raised pressure. Blood is carried from the heart to all parts of the body in the vessels. Each time the heart beats, it pumps blood into the vessels. Blood pressure is created by the force of blood pushing against the walls of blood vessels (arteries) as it is pumped by the heart. The higher the pressure, the harder the heart has to pump.

Main idea: hypertension
Function: definition

Features of Paragraph Function:



They help us to identify a person...

LINGUISTIC FEATURES OF PARAGRAPH FUNCTION

Analysis	Example	Features
<p>Main idea: Pneumothorax / occurrence</p> <p>Function: Classification</p>	<p>Text B</p> <p>Pneumothorax is when air gets into the pleural cavity, often leading to a fully or partially collapsed lung. There are four <u>types</u> of pneumothorax. They are:</p> <ul style="list-style-type: none"> • <u>traumatic pneumothorax</u>. This occurs when an injury to the chest (as from a road accident or gun or knife wound) causes the lung to collapse. • <u>tension pneumothorax</u>. This type can be fatal. It occurs when pressure inside the pleural cavity is greater than the outside atmospheric pressure. It can force the entire lung to collapse and can push the heart toward the lung, putting pressure on both. • <u>primary spontaneous pneumothorax</u>. This happens when a small air bubble on the lung ruptures. This may happen for no obvious reason or while undergoing changes in air pressure (like when scuba diving or mountain climbing). • <u>secondary spontaneous pneumothorax</u>. This typically happens to those who already have lung disease. As the lung is already compromised by disease and may have diminished capacity, this can be a serious complication. 	<p>You will see <u>types</u></p>
<p>Main idea: Aspiration</p> <p>Function: Instructions</p>	<p>Text C</p> <ul style="list-style-type: none"> • Estimate NEX measurement (Place exit port of tube at tip of nose. Extend tube to earlobe, and then to xiphisternum) • Insert fully radio-opaque nasogastric tube for feeding (follow manufacturer's instructions for insertion) • Confirm and document secured NEX measurement • Aspirate with a syringe using gentle suction <p>Aspirate obtained? YES / NO</p> <p>Try each of these techniques to help gain aspirate:</p> <ul style="list-style-type: none"> • If possible, turn child/infant onto left side • Inject 1-5ml air into a tube using a syringe • Wait for 15-30 minutes before aspirating again • Advance or withdraw tube by 1-2cm • Give mouth care to patients who are nil by mouth (stimulates gastric secretion of acid) • Do not use water to flush <p>Aspirate obtained? YES / NO</p> <p>Test aspirate on CE marked pH indicator paper for use on human gastric aspirate</p> <p>pH between 1 and 5.5 / pH NOT between 1 and 5.5</p> <p>PROCEED TO FEED or USE TUBE Record result in notes and subsequently on bedside documentation before each feed/medication/flush</p> <p>Proceed to x-ray, ensure reason for x-ray documented on request form</p> <p>Competent clinician (with evidence of training) to document confirmation of nasogastric tube position in stomach</p> <p>DO NOT FEED or USE TUBE Consider re-siting tube or call for senior advice</p> <p>A pH of between 1 and 5.5 is reliable confirmation that the tube is not in the lung, however, it does not confirm gastric placement. If this is any concern, the patient should proceed to x-ray in order to confirm tube position. Where pH readings fall between 5 and 6 it is recommended that a second competent person checks the reading or retests.</p>	<p>Step by step...</p> <p>1</p> <p>2</p> <p>3</p>

<p>Main idea: Malaria / geography</p> <p>Function: Information</p>	<p style="text-align: right;">PPP SAMPLE</p> <p>Text A</p> <p>Malaria occurs mainly in the tropical areas of Africa, Asia and Latin America. Malaria is a parasitic disease spread by the bite of the female <i>Anopheles</i> mosquito, which results in infection of the red blood cell. Five main species of the malaria parasite infect humans: <i>Plasmodium falciparum</i> (the severest form), <i>Plasmodium vivax</i>, <i>Plasmodium ovale</i>, <i>Plasmodium malarie</i>, <i>Plasmodium knowlesi</i>.</p> <p>Australia was declared malaria-free by the World Health Organization in 1981, and since then, only a small number of cases of locally acquired malaria have been reported from North Queensland. Severe malaria may lead to foetal loss and high maternal mortality due to hypoglycaemia and acute respiratory distress syndrome (ARDS). All forms of malaria in pregnancy may adversely affect the mother and foetus. The main complications are: miscarriage, stillbirth, preterm birth, low infant birth weight, severe maternal and neonatal anaemia.</p> <p>Pregnant women should be advised to avoid travel to malaria-endemic areas. For pregnant women who cannot avoid travelling, the medical officer should consult with an Infectious Diseases specialist or experienced Travel Medicine doctor to determine the appropriate chemoprophylaxis agent.</p>	<p>Features?</p> <ul style="list-style-type: none"> • Numbers • Dates • Facts • Doesn't tell me what to do (no modal verbs, etc.)
<p>Main Idea: STI</p> <p>Function: Advice/ Guidelines</p>	<p>Text D</p> <ul style="list-style-type: none"> • Encourage follow up one week after presentation/treatment to: <ul style="list-style-type: none"> - check adherence with medication and symptom resolution - check test results: STI results (especially HIV) should be given in person - ask again about sexual partners and confirm if any partners have been tested/treated – contact tracing is essential to avoid reinfection - reinforce continuing education and prevention information and check free condoms supplied to patient - encourage the patient to present for a check-up anytime they get symptoms or feel at risk of an STI • Every patient with an STI diagnosis should have an STI check at 2 to 3 months after initial treatment: <ul style="list-style-type: none"> - about one third are re-infected at 3 months, often because their partner remained untreated - patients treated for infectious syphilis e.g. syphilis of less than 2 years duration, should be tested at 3-6 months and at 12 months - HIV test should be offered at the time of the initial STI diagnosis, however a repeat test may be needed at 6 weeks – after the 'window period.' 	<p>Features:</p> <ul style="list-style-type: none"> • <u>Modals</u> (obligation): should, must, have to, etc. • <u>Imperative</u>: Starts with first form of verb • If • <u>Negatives</u>: do not, avoid, never, etc.
<p>Main Idea: Tetanus</p> <p>Function: <i>Definition</i></p> <p><u>Note:</u> A definition is just a type of information text</p>	<p>Text A</p> <p>Tetanus is a severe disease that can result in serious illness and death. Tetanus vaccination protects against the disease.</p> <p>Tetanus (sometimes called lock-jaw) is a disease caused by the bacteria <i>Clostridium tetani</i>. Toxins made by the bacteria attack a person's nervous system. Although the disease is fairly uncommon, it can be fatal.</p>	<p>Features:</p> <ul style="list-style-type: none"> • Be verb in present tense • Medical definitions often have RESULTS language

Main Idea: Phlebitis Function: Criteria	Phlebitis Scale		Features: You have points! 1, 2, 3, 4 So that you can Decide on something (severity, treatment)
	Grade	Clinical Criteria	
	0	No symptoms at access site	
	1	Erythema	
	2	As 1, plus pain	
	3	As 2, plus streak formation and a palpable venous cord	
4	As 3 with a palpable venous cord > 1 inch in length and purulent drainage		

Questions?

One last problem... exception...

Important: what is this?

Text D

	Severe malaria in pregnancy	Uncomplicated malaria in pregnancy
First trimester	Artesunate 2.4 mg/ kg IV on admission and repeat at 12 hours and 24 hours, then once daily until oral therapy is tolerated OR (if parenteral artesunate is not immediately available) Quinine dihydrochloride 20 mg/kg IV over 4 hours as a loading dose, then 10 mg/kg IV over 4 hours (starting 4 hours after loading dose is completed), 8-hourly until oral therapy is tolerated	Quinine sulphate 600 mg (adult under 50 kg: 450 mg) orally, 8-hourly for 7 days, PLUS clindamycin 300 mg orally, 8-hourly for 7 days
Second and third trimester	IV artesunate as above IV quinine should be avoided as it is associated with recurrent hypoglycaemia	Artemether + lumefantrine tablets 20 + 20mg 4 tablets per dose orally with fatty food or full-fat milk (to ensure adequate absorption of lumefantrine) at 0, 8, 24, 36, 48 and 60 hours, making a total adult dose of 24 tablets in 6 doses

Main idea:

Schedule	Benzathine penicillin (Bicillin LA [®])			DTP
4				IHW/SM R&IP/IPAP/SRH
Form	Strength	Route of administration	Recommended dosage	Duration
Pre-filled syringe	900 mg in 2.3 mL	IM	Adult 1.8 g (give 2 separate injections)	Stat
Provide Consumer Medicine Information: may lead to development of diarrhoea, nausea and inflammation at injection site. Patients should report development of diarrhoea immediately to health professional. Tell health professional if you get severe pain in the muscle where the injection was given				
Note: be aware of cross-reactivity in patients with allergy to carbapenems and/or cephalosporins. Be aware that severe colitis due to <i>Cl. difficile</i> can be caused by penicillin. If the patient develops severe diarrhoea contact the MO/NP immediately				
Contraindication: in patients with a history of hypersensitivity to penicillin				
Use in pregnancy: Category A				
Administration tips: See Administration tips for benzathine penicillin (Bicillin LA) and procaine penicillin.				

Text B

Technique	Rationale
<p>After skin preparation, use a tourniquet to increase the venous pressure and pull skin taut in opposite direction of needle insertion. Avoid excessive pressure to cannulation site to prevent flattening of vessel.</p>	<p>Increases surface tension so facilitates smoother incision of skin with less surface area contacting cutting edge of needle.</p>
<p>For an easily palpated vessel, use approximately 25° angle with the bevel up.</p>	<p>Less steep angles increase the risk of needle cutting along surface of vessel. Steeper angles increase risk of perforating the back wall of the vessel.</p>
<p>Once vessel has been penetrated</p> <ul style="list-style-type: none"> • Advance the needle slowly with the cutting edge facing the top of the vessel and do not rotate the axis 	<p>Any manipulation may traumatise the intima of the vessel. The use of a back-eye needle will eliminate the need to rotate the needle due to poor flows.</p>
<ul style="list-style-type: none"> • Tape the needle at the same angle or one similar to the angle of insertion 	<p>Pressing the needle shaft against the skin moves the needle tip from the desired position within the vessel.</p>
<ul style="list-style-type: none"> • Remove needle at angle similar to angle of insertion and never apply pressure before the needle is completely out. 	<p>Avoid trauma to the intima by dragging the cutting edge along it.</p>