UNIVERSIDAD MAYOR DE SAN ANDRÉS

FACULTAD DE HUMANIDADES Y CIENCIAS DE LA EDUCACIÓN

CARRERA DE LINGÜÍSTICA E IDIOMAS



A CONTRIBUTION TO THE DEPARTMENT OF MEDICINE THROUGH THE TRANSLATION OF A MEDICAL TEXTBOOK FROM ENGLISH TO SPANISH

Trabajo Dirigido para obtener el Título de Licenciatura

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To God

To my dad Flodio To my mom Elva To my brother Gonzalo To my lovely pet Bruno Because they are the reason of my life.

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To my academinc tutor Lic. JACQUELINE AUZA SANTI for showing me there are lot of things to learn and to do.

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To my career Linguistics and Languages.

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GLOSSARY OF ABBREVIATIONS

- 1 UMSA: Universidad Mayor de San Andrés
- 2 ECOE: Evaluación de Competencias Objetivamente Estructuradas
- 3 IDH: Impuesto de Hidrocarburos
- 4 LUDESA: Liga Universitaria Deportiva de San Andrés
- 5 ARCU: Acreditación Regional de Carreras Universitarias
- 6 SAFCI: Salud Familiar Comunitaria Intercultural
- 7 ONGs: Organizaciones No Gubernamentales

8 INT: Interno

- 9 IGBJ: Instituto de Gastroenterología Boliviano Japonés
- 10 INO: Instituto Nacional de Oftalmología
- 11 COSSMIL: Corporación de Seguro Social Militar
- 12 SSU: Seguro Social Universitario
- 13 CNS: Caja Nacional de Salud
- 14 GAMLP: Gobierno Autónomo Municipal de La Paz
- 15 SEDES: Servicio Departamental De Salud
- 16 RAN: Reunión Académica Nacional
- 17 CEUB: Comité Ejecutivo de la Universidad Boliviana

18 LINGUA FRANCA: A lingua franca (or working language, bridge language, vehicular language, unifying language) is a language systematically used to make communication possible between people not sharing a mother tongue, in particular when it is a third language, distinct from both mother tongues.

Abstract

The present written report attemps to make reference to a translation project that was developed thanks to an agreement between the Department of Medicine and the Department of Linguistics and Languages in order to create a cooperation between both institutions. This Supervised Project has the objective of contributing to the Department of Medicine at the Mayor de San Andrés University in the translation of a virtual medical textbook ("*Bate's Guide to Physical Examination and Hystory Taking*"). It was carried out in order to cooperate students and doctors who want to have access to the information that this book written in English can offer to those who cannot speak and understand this language. On the other hand, it is also intended to collaborate to the Department of Linguistics and Languages with a glossary of medical terms that will be useful for future works in this specific area of translation. At the same time, It makes reference to all the activities developed during the whole translation process. It is particularly concerned with every stage of the translation as well as the analysis of the medical terms, all the translation tecniques used and the steps followed for the development of the translation work.

This work consists of five chapters in which we can find all the information related to the activities and the development of the whole Supervised Project. The first chapter starts with a general description about the Department of Medicine (history of the institution), the organization of the institution (strategic and institutional plan), and followed by the needs and identification of the problem. It contextualizes our Supervised Project with relation to the organizational needs of the Department of Medicine and illustrates how our work has been intended to contribute to the improvement of a Department of Medicine which is already strong and advancing.

The second chapter constitutes the interdisciplinary conceptual reference which has guided our translation and based it. This is done in order to define a concept, main method, style, procedures (tecniques) and steps of the translation. This framework considers the meaning and methods of academic translation with reference to our source text (*Bate's Guide to Physical Examination and History Taking*). It applies concepts such as equivalence and language function to determine the methods, style and steps suitable for our translation task. This includes a consideration of both formal and dynamic equivalence, as well as the function of the target text. It then justifies the use of literal translation and various other translation techniques, including modulation, in the completion of the Supervised Project. It also explains the necessary process of revision and editing for this translation.

The third chapter presents the project proposal in which it is addressed the justification, objectives, fulfillment indicators, and a chronology of activities such as: action strategies, work planning and action plan. It also demonstrates the methods of translation used with examples from the course and target texts. It also shows glossaries of terms encountered during the process of translation.

The fourth chapter deals with the development of the project proposal that gathers the main aspects about the project schedule, sequence of activities (stages of the translation process) achievements and experiences. It records the successful implementation of the project proposal in relation to the indicators established in chapter three. This shows the actual sequence of steps taken to complete the translation.

The fifth chapter focuses on the conclusions and recommendations that derived from the whole process of the Supervised Project. Here we explain the impact of our work and make suggestions for how other Linguistics and Languages students can do other translations in the future, including steps to take before translating and translation itself. Finally, it offers appendixes in which it is included the agreement between the Department of Medicine and the Department of Linguistics and Languages as well as the report of the Faculty of Medicine, the technical terminology found during the translation, and other annexes as some samples of the chapters of the translated medical textbook.

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I. Introduction

The Department of Linguistics and Languages as a part of the Mayor the San Andrés University has as its main purpose and objective the training of professionals in three different areas (teaching, investigation and translation) of human scientific knowledge in order to contribute to the development and progress of the Bolivian society through the application of projects of social interaction. This institution has collaborated with other organizations in different projects related to the areas of its competence. One of these important contributions has been made thanks to the implementation of the Supervised Project.

According to the VIII and IX Congress of Universities, the Department of Linguistics and Languages adopted the implementation of the Supervised Project as one of the ways to obtain a degree in Linguistics and Languages ("Jornadas Académicas 2003 y 2007"), and students who have chosen this modality put into practice their knowledge and skills that have been acquired during all the years of study in order to solve a problem of a private or public institution in relation to the process of teaching and learning languages, translation and investigation when is required and needed. In the specific case of the translation area, the students who feel able to work as translators have carried out some projects concerning to this field of study.

Taking into account that translation is not an easy task, it is important to be very conscious that the process of translation requires a lot of knowledge and effort from the translator. As "Linguistics is the scientific study of language" (Oxford Advanced Learner's Dictionary, 1992: p. 749) all the areas involved with it, such as syntax, semantics, morphology and phonology are important. A translator must translate texts through the application of his or her knowledge of linguistics and, in words of Hurtado Albir:

"El traductor puede volver a desentrañar el sentido del texto origen, una vez que ha recodificado el sentido en la lengua traducida. En él se producen procesos controlados y no controlados, y que requiere procesos de identificación y resolución de problemas, aplicación de estrategias y toma de decisiones". (*Traducción y Traductología: Introducción a la traductología*, 2001: p. 362-370).

Or in respect to Delisle J.

"Operación que consiste en determinar la significación de los signos lingüísticos en función de un querer decir concretizado en un mensaje, y restituir después ese mensaje íntegramente mediante los signos de otra lengua" (*L'Analyse du discours comme méthode de traduction. Cahiers de Traductologie*, 1980: p. 68)

The work of a translator is not only to change a text from one language to another, but to be a kind of mediator between two different language communities, because in this way information can be shared from one culture to another. A translator must have a lot of knowledge of the *source language* (L1) as well as the *target language* (L2), as argued by Cohen:

"La traducción es una actividad que consiste en comprender el significado de un texto en un idioma, llamado *texto origen* o texto de salida, para producir un texto con significado equivalente, en otro idioma, llamado *texto traducido* o texto meta" (*Translation*. 1986: p. 12).

On that account, the Department of Medicine, as one of the public institutions that belongs to the UMSA University, decided to be part of an agreement in relation to the Department of Linguistics and Languages, this agreement seeks to make possible the translation of some of its valuable written information from English into Spanish. As a result of this agreement, the present report of Supervised Project is focused on the translation of a medical textbook ("*Bate's Guide to Physical Examination and History Taking*") from English into Spanish. The 8th edition of this medical textbook in PDF format contains eighteen chapters and deals with General Medicine. Its content guides beginner students of medicine as well as doctors who are involved in the teaching matters of this area to history taking, interviewing, and other core assessment skills such as: step-by-step examination techniques that outline correct performance of physical examination and abnormalities with differential diagnoses.

And as it was mentioned above, that translation is not an easy task, medical translation is a branch of scientific and technical translation and is a very important type of translation. As

Montalt (*Medical Translation and Interpreting*. 2011: pp. 80-83) emphasises that medical translation is one of the most active types of professional translation. The researcher suggests that medical terms are the main challenge for a translator of medical texts. Therefore, a translator should be aware of the importance of understanding the medical terms he/she comes across during the translation process in both languages and should also be aware of the sensitivity of the subject matter.

In this respect, this report makes reference to the activities developed during the whole process of the Supervised Project. In this way, the work is divided in three main stages. The first stage involves the contribution to the Department of Medicine about the translation of the book and all the relevant information and the needs of support about this institution. Then, the project proposal is expressed taking into account the previous information in order to describe and specify the purposes and activities of the project. Concerning to this stage, the medical textbook was mainly translated with the purpose of helping to medical students to have access to the information that this book originally written in English can offer about health literature but in a language they can understand as it is the case of Spanish.

The second stage deals with the translation process itself (methods and techniques of translation) and the analysis of the translation. This stage tackles the steps followed in order to develop the translation; the recognition of the information and the technical terminology, the choice of the appropriate translation technique, the translation of the first draft, the review of the first draft, the feedback, the correction, the revision and the editing of the translation.

The third stage represents the contribution to the Department of Linguistics and Languages with the development of a glossary of technical medical terms found during the translation of the book in order to help future works in this area, as a result, all the terms in the glossary are listed in alphabetical order for a better understanding. In sum up, the present work shows all the activities done during the whole process of the Supervised Project and the translation of the medical textbook according to the agreement between the Department of Medicine and the Department of Linguistics and Languages as well as the objectives, strategies and action plan in order to develop, carry out and reach the Supervised Project's objectives through a proper sequence of actions.

1.1. IDENTITY AND DESCRIPTION OF THE INSTITUTION

To develop this project we have worked for the students and all the members of the Department of Medicine, which is one of the departments that belongs to the UMSA (Universidad Mayor de San Andres) in La Paz city. For this reason, we began by considering the history, mission and vision of the institution and then conducted an analysis of its strengths, weaknesses, opportunities and threats.

1.1.1. History of the institution

On April 1826 the Governor of La Paz city, Andres de Santa Cruz, recommended the creation of a school with courses in Mineralogy and Drawing. Sucre city approved the decree on April 4th 1826 of seven lectures, one of which was medicine. The School of Science and Art suggested teaching Spanish, Latin, French and English. The institution also taught medicine in Spanish.

The medicine course was divided in 8 parts: 1) general and particular anatomy; 2) physiology and hygiene; 3) pathology and pathological anatomy; 4) therapy and medicine; 5) operating effects, doctors and obstetricians; 6) medical operating clinic; 7) law and public medicine; and 8) pharmaceutic and experimental pharmacology.

The decree on date January 24th, 1824 written by Marshal Santa Cruz and his secretary Jose Maria de Lara, approved the school called GENERAL SCHOOL OF MEDICAL SCIENCE which would work with four lectures: medicine, surgery, pharmacy, chemistry and physics.

The teaching was five years of study. The hospital San Juan de Dios worked with the School for Anatomy and Clinical Study, providing students opportunities for clinical practice after they had taken and passed the first three years of study.

The students were required to pass five years of study and take general tests. These tests lasted about one hour, and students who failed twice on any particular exam were not eligible to continue.

According to Law Seven in chapter two, Doctor Jose Francisco Passman was elected as Principal and Professor in Medicine, Doctor Jose Maria de Quiroga as Professor of Surgery, Professor Juan G. Marchant as Professor of Physics and Chemistry and finally, Agustin Bravo de Bobadilla as Professor of Pharmacy. (DIARIO DE LA MAÑANA HOY. (1984). Documentación. *Discurso Inaugural a los Alumnos del Colegio de Medicina de La Paz, Pronunciado por su primer Director Dr. José Francisco Passaman el 10 de Agosto de 1834*, La Paz, Bolivia.)

Nowadays, the Scientific Society of Medicine Students of the UMSA is the institution of undergraduate students which promotes investigation and publishes scientific documents about health science.

1.2. ORGANIZATION OF THE INSTITUTION

1.2.1. Strategic and Institutional plan

1.2.1.1. Presentation

The plan has been elaborated by means of UMSA's planning instruments, in which the main principles for its elaboration were: participatory, integral, subsidiary, equitable and strategic.

The plan and its precept were ratified by the Internal Congress in a meeting of Medicine Faculties in October 2010 and it was approved in the XII Conference of Universities.

1.2.1.1.1. Situation analysis

1.2.1.1.1.1. Strengths

- The elements of accreditation and re-accreditation constitute components very important in the life of every superior educational institution of studies. The Department of Medicine of the UMSA University, has been pioneer in the elements of accreditation of the Medicine Faculties, these processes had place in two oportunities, the first one had place in 1997, under the law of CEUB 1048 (Comité Ejecutivo de la Universidad Boliviana) and the law N° 012/2000 of the second ordinary conference of universities, with accreditation from December 1998 to December 2004 of the first accreditation to the MEXA-MERCOSUR (annex 1), and re-accredited in 2005 under the resolution 636/06 by the CONEAU (Comisión Nacional de Evaluación y Acreditación Universitaria) (annex 3) under the same element in a period finished in December of 2011.

The processes of accreditation require the application of instruments of auto-evaluation and the external evaluation in pairs; in the case of the Department of Medicine the first had place in 1997 and the second was developed in 2004.

-Operation of the principles of the University co-government, the right to free speech and thought, the right to choose the subject of study and the functioning of the council in this respect.

-The Academic achievements throughout the year, including the academic coordination in every course, the development of additional courses, the standardization of curricular design, the introduction of the education focused on competences, the achievements in the application of the Evaluación de Competencias Objetivamente Estructuradas (ECOE) in the clinical cycle.

-The facilities and equipment used in classrooms for the development of theoretical activities; the physical and virtual references in the library; and communication advances, such as institutional mail and digitalization of the information.

-Academic training and marks given by the professors.

-The attitude of improving the professor-student statute.

-Resources provided by the pre-course of the university.

-Renowned institutes of investigation- the Scientific Society of Medicine Students.

-The interaction between the institutes of investigation and the health system according to the activities and projects in the area of health attention.

- Activities of investigation included in the undergraduate area.

-Projects developed by means of the Impuesto de Hidrocarburos (IDH) of the UMSA and other resources.

-The development of cultural activities - Diablada and Tobas of Medicine, participation in the championship sports cup of the Liga Universitaria Deportiva de San Andrés (LUDESA) and the COPA SALUD.

-Process of re-affirmation.

1.2.1.1.1.2. Opportunities

-Inter-institutional relations around the whole country, personal attendance at medicine meetings, professors' work in health assistance in many different Health Department Services.

-International relationships with organizations and cooperations (professors from France, Mexico, and student interchange) and group work with Faculties of Medicine related to student interchange in the Acreditación Regional de Carreras Universitarias (ARCU).

-The structure of the autonomies and decentralization law - use of the public establishments of the health system (hospitals and clinics) and social security to have human resources for the Public University, coordination with the government in order to have undergraduate and postgraduate degree resources in the structure of the family health and intercultural community policy.

-Firm requests of undergraduate and postgraduate degree in Medicine and its specialties or areas of study.

- Requests for social interaction activities to the Faculty for the health system and the municipal government.

-The resolution of the academic congress that belongs to the system of universities establishes that the administrative and academic institutions of medicine must have the rank of Faculty of Medicine.

1.2.1.1.1.3. Weaknesses

-During 2011 there were not many students in the clinical and non-clinical postgraduate degree.

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-Unsatisfactory procedures of admission, uncompleted regulation for burden, heterogeneous evaluation system, insufficient application of the Teaching-Learning process according to the Bolivian University (year 2010) that focuses on competences.

-Contradictory dispositions, missing parts in the area of organization, no information about the rights and obligations of the professor-student statute.

-Financial unsustainability risks evidenced by: low budget, the budget does not follow a logical order from a long-term perspective or in terms of projects for the annual operating plan.

-Professors who do not involve themselves, an unequal distribution of professors and students, and partial accomplishment of work schedule.

-Insufficient development of the Administrative management evidenced by: an organizational structure that does not fully meet the Internal Congress rules, class representatives not related with the subjects of study, organizational structure which does not pay attention to the fulfillment of the needs, administrative and financial bureaucracy, low level of application in control mechanisms, Course and Departments Leaderships without control of professors` activities and disseminated information.

-Insufficient social interaction, incomplete systematization of student experiences, limited support of the extra-curricular activities, insignificant systematization of work experience in society, little support and stimulus to university activities and lack of conditions to help people.

-Weak actions to implement the Resolution of the Honorable council of the University which authorizes the creation of actions in order to unify the university, specifically the Faculty at the Clínicas Hospital on Miraflores Avenue. -Weak actions from the authorities to apply the technology of information and communication according to the medical training needs.

1.2.1.1.1.4. Threats

-Financial law that limits reduced schedule to the experienced professors.

-Authorities and students from Private Universities who use public institutions to train Medicine.

-The activities development of postgraduate training performed by the Residence Ministry's program on Salud Familiar Comunitaria Intercultural (SAFCI).

-The critics of the Medicine postgraduate degree Bolivian students abroad (Cuba and Venezuela)

1.2.1.2. Institutional information of the Medicine Department-UMSA

By the end of 2015 the Department of Medicine will have celebrated 185 years in the training of Undergraduate Medicine Professionals, and it is considered as the oldest second superior institution in Bolivia.

The Medicine Department of UMSA constitutes one of the main superior educational institutions because of the curricula, facilities and quantity of students and professors.

It is located in La Paz city, the socio-political center of Bolivia, the seat of Government (including notably the Ministry of Health and Sports), organizations of international cooperation, embassies and No Gubernamental Organizations (ONGs).

In the Department of Medicine there are approximately 2.876 students registered in the last six years. The facilities of the Department of Medicine satisfy the needs of students. In its building there are another three Departments (Nursing, Nutrition and Medical Technology) and other academic programs (Phono-audiology and occupational therapy) where classroom academic activities and laboratory activities happen.

The clinical-surgical training is conducted with the complex of hospitals in the Miraflores zone (Hospital de Clínicas, Instituto Nacional del Tórax (INT), Hospital de la Mujer, Hospital del Niño, Instituto de Gastroenterología Boliviano Japonés (IGBJ), Instituto Nacional de Oftalmología (INO) and Hemocentro) and there are also agreements in the area of medical education and practice with other second and third level hospitals which belong to the Corporación de Seguro Social Militar (COSSMIL), Seguro Social Universitario (SSU), Caja Petrolera de Salud and Caja Nacional de Salud (CNS).

For the first level of health attention there are agreements to work with the Gobierno Autónomo Municipal de La Paz (GAMLP) as well as the Servicio Departamental De Salud (SEDES).

1.2.1.3. Academic and institutional environment

The Department of Medicine and the Faculty of Medicine were ratified by the Organic statute of the Bolivian University, which was approved in the XII Congress that took place in Pando city in 2011.

In the Reunión Académica Nacional (RAN) on 2003 "The Public Bolivian University" was considered as a Superior Education System constituted by Public Autonomous Universities like: San Francisco Xavier in Chuquisaca, San Andrés in La Paz, San Simón in Cochabamba, Tomás Frías in Potosí, Técnica in Oruro, Gabriel René Moreno in Santa Cruz, Juan Misael Saracho in Tarija, José Ballivián in Beni, Nacional Siglo XX in Llallagua and Amazónica in Pando. In virtue of this, The Department of Medicine (which is a part of the Mayor de San Andres University) is legally constituted as an autonomous

Superior Educational Institution by means of its Council of the University and the Comité Ejecutivo de la Universidad Boliviana (CEUB).

The following sections describe the Mission, Vision, Objectives, Profile and the insertion of the professionals trained in the Department of Medicine, this information were taken from of the Internal Congress of the Department of Medicine UMSA 2008.

1.2.1.3.1. Institutional aspects

1.2.1.3.1.1. Mission of the Department of Medicine-UMSA

The mission of the Department of Medicine ¹ is to be an "institution recognized as a center of excellence in the training of doctors" and to have "surgeons who are socially involved and able to promote and improve health and prevent sickness with medical ethics" in order to "benefit Bolivian citizens". It also seeks to "develop medical research and social and cultural interaction in accordance with national health policies".

1.2.1.3.1.2. Vision of the Department of Medicine-UMSA

The vision of the Department of Medicine² is to be a "leader in Medical training of undergraduate and postgraduate degree, humanist, ethic, certified excellence, involved in science and social interaction; it offers health service in its hospital and sanitarian network with quality, equity and efficiency".

1.2.1.3.2. Institutional information

Denomination: Department of Medicine Address: Saavedra Avenue N° 2246, Miraflores Zone Evaluated Department: Department of Medicine

¹ The Mission and Vision of the Departament of Medicine was translated from Spanish to English by Claudia Chambi and Wendy Flores (FACULTAD DE MEDICINA, ENFERMERÍA, NUTRICIÓN Y TECNOLOGÍA MÉDICA. (2011) Documento. Informe Institucional Carrera de Medicina 2011. La Paz, Bolivia)

² The Vision and Mission of the Departament of Medicine was translated from Spanish to English by Claudia Chambi and Wendy Flores (FACULTAD DE MEDICINA, ENFERMERÍA, NUTRICIÓN Y TECNOLOGÍA MÉDICA. (2011) Documento. Informe Institucional Carrera de Medicina 2011. La Paz, Bolivia)

Geographical area: La Paz, Bolivia Legal representative: Dr. Msc. Fernando Romero Alanez (from 2011 to 2014) Director Carrera Medicina Phone number: 2223296 Fax (591-2) 2229689 E-mail address: fernando.romero@umsalud.edu.bo

1.2.1.3.3. Authorities of the Faculty

The following authorities of the Faculty mentioned below were in charged at the moment of

the development of this Supervised Project, it means from 2011 to 2014.

Decano. Dr. Heriberto Cuevas Lizárraga.

Vice-decano. Dr. Christian Trigoso.

Jefes de Departamentos

Dr. Luis Liendo Jefe del Departamento de Ciencias Morfológicas

Dr. Lucio Álvarez Jefe Departamento Ciencias Funcionales

Lic. Remo Estévez Jefe Departamento Patología

Dr. Ernesto Llanque Jefe Departamento Medicina

Dr. Yecid Andrade Jefe del Departamento Cirugía

Dr. Federico Gómez-Sánchez Jefe del Departamento de Salud Pública

Dr. David Asturizaga Rodríguez Jefe Departamento Materno Infantil

Directores de Institutos

Dr. Carlos Salinas Instituto Boliviano de Biología de Altura (IBBA)

Dra. Ximena Aguilar Instituto de Genética (IG)

Dra. María del Pilar Navia Instituto de Investigaciones en Salud y Desarrollo (IINSAD)

Dr. Ricardo Amaru Jefe Unidad de Biología Celular (UBC)

We drew upon the institutional report on the medicine department made by the Faculty of Medicine, Nursing, Nutrition and Medical Technology in 2011. (FACULTAD DE MEDICINA, ENFERMERÍA, NUTRICIÓN Y TECNOLOGÍA MÉDICA. (2011). Documento. *Informe Institucional Carrera de Medicina 2011*. La Paz, Bolivia)

1.3 NEEDS

The authorities and representatives of the Department of Medicine have been working together during all these years in order to develop strategies that make possible a successful education for all the students under their authority. Their work is fundamental for the implementation of these strategies, and for the existence of improvements. Nowadays, their tireless work is shown by the effectiveness of the application of the past strategies and thanks to it, students and all the members of the Department of Medicine have many benefits in terms of: education at different levels (Academic training, Research projects, etc.), facilities (appropriate classrooms for the development of academic activities), and support to protect and defend the rights of every member of this Medicine training college. In this context, indicated by all these elements, the work of the members of the Department of Medicine continues to be essential for the process of strengthening education in Medicine. But even today, there are many needs which have not been attended to yet and this represents a problem because as we mentioned before it is a priority for the Department of Medicine to create strategies to achieve the goals of this institution and all its members. Taking into account all this, now we proceed to describe in terms of the weaknesses and strengths the needs of the Institution:

1.3.1. Needs or requirements of the Department of Medicine

-Expectations about making the Department of Medicine into a real Faculty of Medicine. (Weakness and strength for academic improvements)

-Implementation of the Medicine Congress resolutions. (Weakness and strength for academic improvements)

-The incorporation of the Students' Scientific Society of the Faculty to the Structure of Policies and Action Lines. (Weakness and strength for academic improvements)

-Policy of Institutional Management. (Weakness and strength for academic improvements)
-Policy of excellence in undergraduate professional training. (Weakness and strength for academic improvements)

-Policy of excellence in post-degree professional training. (Weakness and strength for academic improvements)

-Policy for the strength of the scientific investigation and technology. (Weakness and strength for academic improvements)

-Policy for the internal and external development of the social interaction of the University. (Weakness and strength for academic improvements)

-Policy for the improvement of the management of the university. (Weakness and strength for academic improvements)

-Policy for the strength of the international relations. (Weakness and strength for academic improvements)

-A lot of information about the Medicine field written in English needs to be translated into Spanish to be understood by Medicine professionals. (Strong Weakness)

-A lot of projects and investigations developed by Medicine students that need to be translated into English to be well known abroad. (Strong Weakness)

And as we have noticed there are many weaknesses and strengths, but there is a very elemental need that really attracts our attention and it is the lack of learning material written in an official and accessible language to be understood by students. This necessity can cause some problems to Medicine students, because they cannot have access to all the valuable information that books on recent Medicine trends that come from different countries can provide. In many of these books we can see how the medical science is improving and advancing more and more over the recent years and it is necessary that Medicine students as well as doctors can have access to this information, because in this way people and patients in hospitals can have a better medical treatment according to their needs.

Medicine students are trained to be doctors, and a careful preparation for being a doctor starts from reading to practice. It means medicine students put into practice what they have read, that is why; it is essential to have access to written material that can spread knowledge in the Medicine field. For this reason, we decided to make a valuable contribution to our society through the Medicine Department.

We have made it possible through the translation of these Medicine books written in English and put them into Spanish, using all of our linguistic and translation knowledge, as well as our Medicine Field knowledge. It has been worth considering different aspects in translation as the translation techniques and a careful study of the technical terminology in the Medicine field. In fact, it has been very important for us that the meaning of a written material in another language could be understood and expressed into a language that is spoken by many people.

1.3.2. Identification of the problem

English is a global language and, in effect, the official language of science, technology, education, medicine, economics, and so on. In this way, English has really become a *lingua franca*³ that makes it possible to exchange ideas and information from country to country. While it has had a unifying effect on the world in some way, it means that those who do not speak this language face a great problem, because they can lose many opportunities in life. For instance, the education field demands an international language for the exchange of information around the world and when we cannot have access to this information because of the language, it is necessary to find ways to make it possible.

This is the case for the Department of Medicine, in which there is a lot of information written in English. This situation causes many problems to students and professors, because they do not have access to all this information. Conversely, there is a lot of information in Spanish contained within the Department of Medicine that really needs to be expressed in English in order to be known abroad. While translation from Spanish to English does not fall within the scope of this Supervised Project, this example serves to illustrate the significance of the language differences experienced in the Department of Medicine.

³ Lingua franca is a shared language of communication used by people whose main languages are different. (Oxford Advanced Learner's Dictionary, página 749)

When students and professors face this problem, they feel confused and frustrated, because most of the best information about the medical field is written in English and since most of them do not speak or understand the language, they miss all this information and lose the opportunity to learn more about their field of study.

In this respect, according to Lic. Valle who is in charge of the library at the Department of Medicine; there are about 9.101 medical textbooks in total including thesis that are not translated into English. On the other side, from 500 to 1.000 medical textbooks are stored at the basement because they are in English and at the same time they are very old. Therefore; they see the need to translate medical textbooks in PDF format because the old ones have been donated by foreign universities but they could not be translated at that moment, due to the cost they represent for the Department of Medicine. That is why, they decided to make the agreement with the Department of Linguistics and Languages in order to translate most of the medical textbooks in PDF format because it is less expensive to buy or download and they can update the recent information about the medical field.

On that account, our Project is folded in two ways. Firstly, the translation of an English medical textbook into Spanish enables all staff and students to benefit from the content of the book in spite of their current language limitations. Secondly, the development of a Spanish-English glossary assists those who are in the process of learning English or using English texts by giving them a tool to understand recurring or challenging English medical terms.

2.1. CONCEPTUAL REFERENCE

Here we present our theoretical analysis of the task of translating *Bate's Guide to Physical Examination and History Taking*. This analysis helped us to develop a specific, conceptually supported approach to the task of medical translation. We considered the significance, concept, methods and processes of translation.

According to Cronin (2003), translation has a vital role in today's increasingly multicultural and interconnected world. Cronin suggests that we should 'look to a discipline which has mediation between cultures and languages as a central concern to assist us both in understanding globalization and in understanding what it might mean, and why it is difficult to be a citizen of the world.'

2.1. 1. Translation

Roger Bell describes translation as a process which transforms 'a text originally in one language into an *equivalent* text in a different language retaining, as far as possible, the content of the message and the *formal features* and *functional roles* of the original text.' (Bell 1991, emphasis ours).

Here we analyse the components of translation as described by Bell to support his interpretation of translation and understand how it should guide our Supervised Project. We begin with a consideration of the concept of equivalence between two written texts. We then explore dynamic and formal equivalence in relation to the context, purpose and language of our source and target texts. Based on this, we arrive at an approach to the translation of the textbook, before finally considering which specific translation methods suit this approach, as well as the translation steps we will follow.

2.1.1.1. The concept of translation

Translation has been thought of as achieving equivalence between written utterances made in two different languages. The concept of equivalence was defined by Roman Jakobson as substituting *messages* (rather than words) in one language for *messages* in another (Jakobson, 1959). This was further elaborated and subdivided into dynamic and formal equivalence by Eugene Nida (1964a: 159). On dynamic equivalence, Nida says that the most important thing is the way a text is received by its readers: 'the relationship between receptor and message [in the target text] should be substantially the same as that which existed between the original receptors and the message [in the source text]' (Nida 1964: 159). This means that the message must be put in such a way that it seems completely natural for the reader of the target text, just as it would have seemed for the original readers of the source text. On the other hand, formal equivalence puts emphasis on preserving the form, structure and content of the message. This often means that readers of the target text perceive its foreignness, and it does not seem completely natural (Nida 1964: 159).

2.1.1.1.1. Analysis of equivalence in relation to our translation task

Equivalence in translation has been considered from different perspectives. Peter Newmark emphasises the importance of the context of the source text in determining the feasibility of dynamic equivalence. Holz-Manttari and Christiane Nord focus on the idea of equivalence of function between the source and target text. Katharina Reiss considers the function of the language itself to determine the most suitable approach to translation. We treat in turn the context, purpose and language function of the source and target texts.

2.1.1.1.1.1. Context of the text

Peter Newmark emphasises that we must consider the possible differences between the 'space and time' of the source and target texts when considering the choice between formal and dynamic equivalence (Newmark 1981, 69). Space and time refer to the cultural differences that may exist between the context of the source text and that of the target text.

When the cultures of the source and target texts are separated by a great spatial or temporal distance, it may be difficult to understand how the source text was understood by its original readers. This complicates any attempt to attain dynamic equivalence. In our case, the cultural contexts of the source and target texts are substantially similar. *Bate's Guide* was written for student doctors, and will be read by medical students. Consequently, dynamic equivalence should be possible to achieve.

2.1.1.1.1.2. Purpose of the text

Many authors view translation as a commercial activity happening within an institutional context. Christiane Nord argues that a good translation is 'function-preserving' (Nord 1991, 73), which means that it ensures the target text can perform exactly the same function in the target context (for the customer) as the source text did in its context. This perspective is partially relevant to our work because it amplifies our understanding of dynamic equivalence. In seeking to create for the target text readers a similar experience to that which the readers of the source text had, we should naturally consider the purpose for which the text is being read. However, because Bate's Guide could have had many different functions in its source context(s) which are unknown to us, we are not *preserving* its function. Our task concords more closely with the translational action model of translation, proposed by Holz-Manttari. This model views translation more broadly as a purposeful process intended to achieve outcomes that facilitate human interaction. Specifically, Holz-Manttari states that the idea 'is not about translating words, sentences or texts but is in every case about guiding the intended co-operation over cultural barriers enabling functionally oriented communication' (1984, 7-8). In our case, the "functionally oriented communication" will be the Department of Medicine's use of the book's medical information in the training of student doctors. Clearly, the "cultural barrier" here is the fact the information is written in English.

This correctly orients our understanding of what a good translation is towards meeting the requirements of the end users: the translation must allow the Department to do everything

they need to do with it, whether or not this function is exactly the same as the original function(s) of *Bate's Guide*. As such, we will also need to produce a glossary of important terms in English and Spanish for the Department of Linguistics.

2.1.1.1.1.3. Language function of the text

Having acknowledged the overall purpose of the text within a wider context, it is valuable to note Katharina Reiss's consideration that equivalence can be sought at the level of the text itself, depending on the type of text at hand. Reiss categorises texts by the language they use, according to three principal language functions, which are informational, expressive and operative (Reiss 1977, 108-9). Language with the informative function seeks to convey facts and opinions to a recipient. Language with the expressive function is creatively and aesthetically used to bring out the emotions of the source text author. Operative language is that which seeks to induce particular behaviour in the reader. Nord added a further category of language, which is the phatic function. This is language which seeks to establish or maintain contact between the producer and receiver of language (Nord 1997, 40). Bate's Guide is a medical textbook whose aim is to contribute in some way to the professional training of student doctors with information, instructions and procedures. Because of this, we expect the majority of its language to fall definitively within the informational function, which includes language typically used in reference work, reports and lectures (see Figure 1 in Appendix, p. 109). We expect some language to fall within the phatic function where the author seeks to sustain the interest and attention of the reader.

2.1.1.2. Implications for our translation of *Bate's Guide*

We have established that translations seek to attain equivalence between the source and target texts, which can be broken down into dynamic and formal equivalence. Both dynamic and formal equivalence are possible in our case. Secondly, we have determined that achieving functional equivalence between the source and target texts is not necessary, but rather that functional adequacy is desirable. Thirdly, *Bate's Guide* is primarily an

informational text. Here we explore the significance of this analysis to determine the approach to translating that we will take and then the specific methods we will employ.

2.1.1.2.1. Equivalence

Formal equivalence will be essential because it emphasises maintaining the content in its original form, which is necessary to transfer the medical information accurately into Spanish. Dynamic equivalence will be desirable because avoiding giving students the perception of reading a foreign text will allow them to focus more on the medical content. In our case, there is no tension between the two types of equivalence owing to the similarity of the source and target context. The content of the book makes sense within a medical context, to student doctors. This will be equally true for foreign students as for Bolivian students. As such, the experience of reading an accurate, formally equivalent translation will be much the same as the experience the source language readers had. Therefore, we should aim for a high quality formal equivalence, because this is necessary in its own right and sufficient to secure a substantial dynamic equivalence at the same time.

As mentioned with regard to the translational action model, our Supervised Project needs to fulfil certain requirements set by the Department of Medicine; the final product must be able to be used effectively as a study aid. This will require dynamic equivalence. We will maintain the same visual format and layout of the features of the page, such as headings, columns of text and tables. In this way it will look like an original text and be easy to use.

2.1.1.2.2. Main method of translation

We have noted that dynamic equivalence will be largely produced by formal equivalence, given the contextual similarity of the source and target texts. According to Newmark, 'provided that equivalent effect is secured, the literal word-for-word translation is not only the best, it is the only valid method of translation' (Newmark 1981, 39). Here the equivalent effect refers to the idea of the effect of the target text on the readers being equivalent to that

of the source text on its readers. We agree with Newmark. Here it is obvious that if you can achieve the same effect on a reader without modifying the form of the source language, you have no motive to do so. For example, we will not need to make make idiosyncratic or culturally-specific jokes or allusions comprehensible to people in the target culture because, as we have observed, there is a shared medical context and the text primarily has the informative function. Texts of this kind, such as reports and instructional texts are less likely to contain idiomatic language and cultural references.

2.1.1.2.3. Style of translation

We note that Reiss says that where the source text is primarily informative, the translation method should be 'plain prose' (Reiss 1976, 20) and should involve only minimal explication where required to make the source text content comprehensible.

2.1.1.3. Translation procedures

Here we consider different translation procedures referring to the work of Vinay and Darbelnet (1958). Sometimes it is necessary to make some changes to the grammar and syntax of the language. We consider in turn different procedures including adaptation, modulation, and transposition. First we elaborate on literal translation, which is the principal method we used.

2.1.1.3.1. Translation word for word:

This translation is the rendering of text from one to another. This procedure of translation is mainly used for scientific, technical or legal texts. This translation translates texts from one language into another with or without conveying the sense of the original text.

2.1.1.3.2. Literal translation

"The literal translation ranges from one word to one word ('hall', Saal, salle, sala, zal) through group to group (un beau jardín, 'a beautiful garden', *ein schooner Garten*) collocation to collocation ('make a speech', *faire un disc ours*), clause to clause ('when that when that was done' *quand celafuifaii*), to sentence to sentence ('The man was in the street," *Vhomme etait dans la rue*,). The longer the unit, the rarer the one-to-one." Newmark Peter, Manual of Translation, 1995, p. 101-102)

"I believe literal translation to be the basic translation procedure, both in communicative and semantic translation, in that translation starts from here. However, above the word level, literal translation becomes increasingly difficult. When there is any kind of translation problem, literal translation is normally (not always) out of the question." (Newmark 1995, 101-102)

This method involves matching the grammatical composition of the target text with the source text. According to Newmark, the amount of text translated in this way is usually small, and the unit can vary from 'one word to one word ... through group to group ... collocation to collocation ... clause to clause ... to sentence to sentence'

Literal translation forms a basis to most translation approaches, but it does not capture and convey contextual meaning from the source text. As a result, it is particularly inappropriate for novels, plays or other creative texts which draw extensively on an external social and cultural context. However, it is appropriate for the translation of specialized language, for example, technical or scientific texts.

2.1.1.3.3. Adaptation

"This is the 'freest' form of translation. It is used mainly for plays (comedies and poetry, the themes, characters, plots are usually preserved, the SL culture converted to the TL culture and the text rewritten. The deplorable practice of having a play or poem literally translated and then rewritten by an established dramatist or poet has produced many poor adaptations, but other adaptations have 'rescued' period plays" (Newmark 1995, 46.)

Adaptation involves translating not only between two different languages, but between two different cultures. As such, adaptation involves not only literal translation of words, but also capturing and making comprehensible the cultural references of the text. Given that the
text we have translated is medical, and the culture of the readership of the target text is also medical, we do not anticipate needing to use adaptation very much.

2.1.1.3.4. Modulation

"The message's form is altered by a change in perspective or semantics." (http://en.wikipedia.org/wiki/translation)

"As I see, the general concept, since it is a super-ordinate term covering almost everything beyond literal translation is not useful as it stands. However, the 'negated contrary' that I prefer to call positive or for double negative (or double negative for positive) is a concrete translation procedure which can be applied in principle to any action (verb) or quality adjective or adverb. (Newmark Peter, Manual de Traducción, 1995, p. 125)

Thus, modulation is a translation method consisting in throwing a different light on, or looking from a different angle at, the lines to be translated:

- How long have you been here? : *Quandêtes-vousarrivé squand?* (Instead of "Vous êtes là depuis combien de temps?) (Chronological shift)

Two types of modulation are encountered:

1/ metonymical modulation (the cause substituted for the effect, the container for the content, the part for the whole, etc.),

2/ grammatical modulation (affirmative form in English \rightarrow negative form in French – injunction in English \rightarrow interrogation in French – passive voice in English \rightarrow active voice in French, etc.).

1/ Metonymical modulation:

- **Do it by the book**: Faitesçadans *les règles* (the part substituted for the whole)

- She cleared her throat: Elle *s'éclaircit la voix* (the function substituted for the part)

- a life jacket : *un gilet de sauvetage* (the means substituted for the result)

- I've got her under my skin: je *l'aidans la peau* (change of location)

- war's wrenching effects on ordinary lives : *les effets dévastateurs de la guerre sur le commun des mortels* (the people substituted for their lives)

2/ Grammatical modulation:

- The houses were all dark: Pas *une maison n'avait de lumière* (the opposite in the negative form)

- more with rage than timidity: moins par timidité que par colère

- The doors had been taken off their hinges: On *avaiten levé les portes de leurs gonds* (active instead of passive form)

- He was knee-deep in water: L'eau lui arrivait jusqu'auxgenoux (the subject becomes the object)

- How grave he was! *Ilétait d'un sérieux...* (Affirmative form substituted for exclamative form)

- Singing in the rain: Chantons *sous la pluie* (injunctive form substituted for affirmative form)

More examples:

- He'd never imagined he would still be acting at 85: IL était loin de s'imaginer qu'iljouerait encore à l'âge de 85 ans (instead of « Il ne s'était jamais imaginé ... »)

- Keep this to yourself: N'enparle à personne

It is highly important to note that even between similar cultures there are different grammatical and linguistic conventions to convey the same expressions. Modulation means interpreting the essential meaning of the sentence, but putting it into a different and more appropriate semantic form for the target language. This is similar to adaptation, but on a much more granular scale. While adaptation requires a deep understanding of the social, cultural and historical aspects of the source text's context, modulation calls upon knowledge of language conventions and how these differ between cultures. This is evident particularly in idiomatic expressions. To demonstrate, in the example '**The houses were all dark**: Pas

une maison n'avait de lumière' we can see that the convention in English is to use an affirmative statement, while the French says 'Not one house was light', which is a negative statement. Therefore, the same idea is expressed differently, or according to different conventions. As such it is coded in a different way, or modulated differently, between the two languages. We expect to use this method frequently to ensure a high quality translation.

2.1.1.3.5. Transposition

Peter Newmark defines transposition as a translation procedure that involves a change in grammar from the source language to the target language. He mentions four types of transposition (Newmark 1995):

1. – Transposition from singular to plural. Examples: 'furniture' 'des meubles'

2. – Transposition when an SL grammatical structure does not exist in the TL: The neutral adjective as subject: *'I'interessant, e'estque, das Inieres santeist, dafi, V inieres santeeche'* there is a choice of at least, 'What is interesting is that,...'The interesting thing is that' 'It's interesting that...'

3. – Transposition when literal translation is grammatically possible but may not accord with natural usage in the TL. Examples: '*II ne tardera pas a rentrer*' 'he will come back soon' 'he will be back (return) in a moment (shortly)

4. - Transposition or the replacement of a virtual lexical gap by a grammatical structure. For example: *apprisa sortie*,' after he'd gone out'.

Transposition means recognizing that some grammatical forms in English do not exist in the same form in Spanish. For example, the following sentence uses the present perfect in the impersonal form in English: 'in the Department of Medicine there have been approximately 2714 students registered in the last six years'. In Spanish, it is more common to use the present tense in the impersonal form: 'hay aproximadamente 2714 estudiantes...' In cases like this, we will have to 'transpose' the sentence into the appropriate grammar and not make a literal translation. We therefore expect to use transposition frequently.

2.1.1.4. Translation steps

Throughout our university studies we have refined a set of translation steps to ensure high quality target texts. These steps are the result of an accumulation of experience, as we have refined our translation skills, and are not therefore based directly on any particular author's work. As Hurtado explains:

'La traducción es una habilidad, un *saber hacer* que consiste en saber recorrer el proceso traductor, sabiendo resolver los problemas de traducción que se plantean en cada caso. La traducción más que un *saber* es un *saber hacer*; en este sentido, siguiendo la distinción de Anderson (1983) entre conocimiento declarativo (*saber qué*) y conocimiento procedimental u operativo (*saber cómo*), tendremos que clasificar el saber traducir como un conocimiento esencialmente de tipo operativo y que, como todo conocimiento operativo, se adquiere fundamentalmente por la práctica.' (Hurtado 2001, 25-26).

Here are the steps which we have developed to produce high quality translations.

2.1.1.4.1. Preparation

Before translating any text it is important to read the text twice or three times to get to know the text very well. The intention, register and tone must be noted. It is also necessary to mark the difficult words and passages and start only when everything is understood.

2.1.1.4.2. First draft

To start translating the translator begins doing so with the first sentence, then the paragraph or chapter. It is clearly necessary to read the source text continuously to make sure the target text has kept the meaning in the source text.

2.1.1.4.3. Evaluation

The source and the target text are continuously evaluated. The translator maintains the contextual meaning of the work through constant evaluation; after all it is always possible to find appropriate words to transfer the meaning from one language to another.

2.1.1.4.4. Editing

After making all revisions, the final step is editing. It is always necessary to keep the source text format and style. Whenever editing takes place, the translator's work is to edit the final target text considering always the source text as the model.

2.1.1.5. Conclusions

Therefore, our general approach to the translation of *Bate's Guide* will be to maintain the form, structure and content of the source text, and to convey the information contained in the source text plainly and accurately. We will use the literal approach as much as possible, and where a literal, word-for-word translation is not possible, we will use modulation and transposition. We will also meet the requirements set by the Department of Medicine by including a glossary. Our process will involve preparatory reading and the use of several drafts along with constant editing and evaluation to create a strong translation.

CHAPTER 3

3.1. PROJECT PROPOSAL

It is a fact that in the Department of Medicine, which belongs to the Mayor de San Andrés University, there are many problems and needs related to academic matters and this has drawn the attention of the members of the Medicine Department as well as the Linguistics and Languages Department. This is the case with the teaching and learning process related to the education through written texts in another language.

As we know, there is a lot of material related to medical topics written in English because most of the recent advances in modern medicine have been developed by clinicians who speak English. Much of this material has not been translated into Spanish. There are many medicine students who do not speak this language and this can represent a problem when they want to know about these new medical advances.

The Department of Medicine and that of Linguistics and Languages have been working together in order to solve one specific aspect which is translation. To this end, some students from the Linguistics and Languages Department have chosen to be part of some projects in the translation area in this institution. They are required to translate medical books as well as other types of information related to the field of medicine in Bolivia. Consequently, we have chosen the Supervised Project as a way to obtain a degree in Linguistics and Languages, proposing a project in the translation area.

This work consists of the translation of written information from English into Spanish according to the needs of the Department of Medicine. We have been very conscious that the process of translation is not an easy task. In this regard, we have needed to put in all our effort and linguistic knowledge, since translation work needs a lot of mental energy from the translators to achieve a satisfactory result.

The following section explains important aspects considered in the development of this work.

3.1.1. Justification

When we wonder why we develop a translation we can notice that we are dealing with a lot of reasons that take us to make a translation about a specific written material in another language. Bearing in mind all this, we can say that a justification is to give arguments why we are developing an activity and why in this case we have chosen translation as an important tool that lets us to express the meaning of speech or writing in a different language. Thus, we describe in a deeper way the reasons why we are developing this work, so it means that now we offer the justification for our work.

As we have seen before, that the process of translation involves to change something that has been written in one language into a different language, it means that we are going to face many difficulties, and one of these difficulties is related with the understanding of books written in English, we have to recognize that most of the University students have access to books written in English, but sometimes they cannot understand the language, and it makes them to lose many opportunities to learn more about their field of study, then we can realize how frustrating it can be for students. The fact is that English is a global language, and it means that most of the best information about different areas of study is written in that language. To deal with this reality in our environment where there are few chances to invest money to translate these books into Spanish language and where it is difficult to find ways to compensate these limitations it becomes a real problem for any institution, because it makes them to feel frustrated that is why we felt the necessity to contribute in some way to students, professors and all the members of the Department of Medicine offering them our help to translate a medical textbook "*Bate's Guide to Physical Examination an History Taking*" written in English into Spanish.

It is also important to mention that it is evident the existence of automatic translators, but they can translate the main meanings and sometimes connotations of isolated words but most of the times out of context. This is a frequent problem that translators face at the moment of translating technical terminology in any specific field of study, for example medical terminology must be analyzed many times because of the importance it represents, we cannot trust on the first meaning we find because it could be wrong or misunderstood and it can cause a problem for the doctors and students who read the book because they won't be able to understand the real meaning of the text.

In the end, nothing can fully replace the role of human translators in the translation process and all of the new translation technologies are to support the translator and not to replace him/her. Craciunescu, O; Gerding, C. and Stringer, S. (2004) made an analysis of the capabilities of MT (Machine Translation) and CAT (Computer-Assisted Translation). And concluded that:

"It is clear that computers could not even begin to replace human translators with such texts. Even with other kinds of texts, our analysis of the roles and capabilities of both MT and CAT shows that neither is efficient and accurate enough to eliminate the necessity for human translators." (*Machine translation and computer assisted translation: a new way of translating? Translation Journal*, 2004).

In their article, they argued that MT is a translation method that focuses on the source language, while human translation aims at comprehension of the target language. Machine translations are therefore often inaccurate because they take the words from a dictionary and follow the situational limitations set by the program designer.

On the other hand, we are very conscious that the translation of this book cannot solve the problem of the lack of knowledge about English language at the Department of Medicine, but as one of the main objectives of the Department of Linguistics and Languages is to train students in different areas (teaching, translation and investigation) in order to contribute to the society, and in this case we can cooperate in some way to increase the health literature in this institution, because this book about general medicine has a really good information to offer to medical students, that is why, it was considered as proper to be tanslated.

Other important reasons to develop this work are: practice and learning, because at the moment to help other people in the translation field we, as linguists, have the opportunity to put into practice all the knowledge we have acquired about the process of translating texts

and all the implications it involves like the different types of translation we can use to develop our work and we can also practice different skills such as: reading, writing and we can deal with Syntax, Grammar, Semantics and Morphology which are important areas of study in the Linguistics field and another reason is to contribute in the knowledge of technical terminology related to the Medicine area.

Hence, the purpose of this work is to contribute to the Department of Medicine translating the written material in a different language and put it into a language that is spoken by many of the medical students, so, they will be able to have access to all that material and books won't be kept anymore. That is why we want to suggest translating some of these texts through the use of translating methods that really work in order to solve this problem.

3.1.2. Objectives

3.1.2.1. General objective

1. To contribute to the Department of Medicine by translating a medical textbook "Bate's Guide to Physical Examination and History Taking" from English into Spanish.

3.1.2.2. Specific objectives

1. To translate a medical textbook "Bate's Guide to Physical Examination and History Taking" from English into Spanish.

2. To contribute to the Department of Linguistics and Languages with the development of a glossary of technical medical terms.

3. To use, reflect upon and describe the stages of a thorough and professional translation process.

4. To analyze critically different methods of translation and demonstrate their particular utility for our work.

3.1.3. Description of the medical textbook "Bate's Guide to Physical Examination and History Taking"

The medical textbook was handed in by the tutor of the Department of Medicine (Dr. Fernando Romero Alanez), the book is in PDF format, it means that it is a virtual book. In this way, it is important to explain that the book was not chosen by the students who translated it, it was the choice of doctor Romero, who explained that doctors at the Department of Medicine always look for new books related to general medicine in order to teach begginer students of medicine and as much books the library has, it is better for education of medical students.

Taking into account all this, we offer a fully explanation of the medical book as follows:

The 8th edition of the pre-eminent medical textbook denominated "Bate's Guide to Physical Examination an History Taking" contains foundational content to guide students' approaches to history taking, interviewing, and other core assessment skills, as well as fully illustrated, step-by-step techniques that outline correct performance of physical examination. The book features a vibrant full-color art program and an easy-to-follow two-column format with step-by-step examination techniques on the left and abnormalities with differential diagnoses on the right. The comprehensive, evidence-based content is intended for begginer students of medicine as well as doctors who are involved in the teaching matters of this area.

The author of this book is Lynn Bickley, who is an experienced doctor, professor of internal medicine and neuropsychiatry at the Texas Tech University Health Sciences Center who after exercised her proffession during many years decided to share her knowledge to other proffesionals and students of medicine. She has paid a lot of attention to the development of the content of the book, it was fully revised and updated to reflect the most recent health care literature. Many photographs and drawings have been added to better illustrate key points in the accompanying text. Design and layout has been revised to increase discoverability of core material and special assessment tips. For all these reasons,

this medical book provides clearer insights into the skills of the art of learning and practicing the medical proffesion.

Now we proceed to describe the medical book in more detailed terms:

Type of document: Virtual medical textbook (PDF Format) *Title of the book:* "Bates' Guide to Physical Examination and History Taking"

Original language: English Number of chapters: 18 Number of pages: 1.010 Number of pictures: 944 Number of diagrams: 66 Number of tables: 135 Translation: English - Spanish

List of chapters

Chapter 1: An Overview to Physical Examination and History Taking

Chapter 2: Interviewing and the Health History

Chapter 3: Beginning the Physical Examination: General Survey and Vital Signs

Chapter 4: The skin

Chapter 5: The Head and Neck

Chapter 6: The Thorax and the Lungs

Chapter 7: The Cardiovascular System

Chapter 8: The Breasts and Axillae

Chapter 9: The Abdomen

Chapter 10: Male Genitalia and Hernias

Chapter 11: Female Genitalia

Chapter 12: The Pregnant Woman

Chapter 13: The Anus, Rectum and Prostate

Chapter 14: The Peripheral Vascular System

Chapter 15: The Musculoskeletal System

Chapter 16: The Nervous System

Chapter 17: Assessing Children: Infancy through Adolescence

Chapter 18: Clinical Reasoning, Assessment and Plan

3.1.4 Fulfillment indicators

In the objectives of this work, we have expressed our interests and main goals and all of them are related to translation as an important tool, in order to contribute to the Department of Medicine, translating a medical book *"Bate's Guide to Physical Examination and History Taking"* from English into Spanish, because we have seen professors and students of Medicine Department might be benefited in some way with the translation of this book.

It is important to bear in mind, that the medical textbook handed in by Dr. Fernando Romero Alanez (tutor of the Supervised Project at the Department of Medicine) is in PDF format, it means that it is a virtual book and it was not chosen by the students who translated it, it was the choice of doctor Romero.

On the other hand, we are very conscious that the translation of this book cannot solve the problem of the lack of knowledge about English language at the Department of Medicine, but it may help in some way to increase the written information about medical textbooks at its library and to transmit the knowledge from doctors who are native speakers of the English language, and we want to be the mediators who help to transmit this knowledge.

Nevertheless, in words of Lic. Valle who works at the library of the Department of Medicine there are many books as a source of information for medical students, but it is important to specify which books are at the library and which are stored and students cannot have access to them. For example: there are about 9.101 medical textbooks in total at the Department of Medicine and from 500 to 1.000 theses that are not translated into English. On the other side, from 500 to 1.000 medical textbooks are stored at the basement and cannot be read by anybody because they are in English and they are old and they lack current information.

According to Tintaya (2008, 398), indicators mean referents or aspects for verifying whether the objectives have been reached through considering results.

OBJECTIVES	INDICATORS	RESULTS
General Objective: 1 To	The 100 percent of first	The whole first draft of the
contribute to the	draft of the translation is	translation has been
Department of Medicine by	finished in Department of	concluded and delivered to
translating a medical	Medicine until March 24 th	the Department of
textbook "Bate's Guide to	2013.	Medicine.
Physical Examination and		
History Taking" from		
English into Spanish.		

OBJECTIVES	INDICATORS	RESULTS
Specific Objective: 1 To	The 100 percent of first	The whole first draft of the
translate a medical textbook	draft of the translation is	translation has been
"Bate's Guide to Physical	finished in Department of	concluded and delivered to
Examination and History	Medicine until March 24 th	the Department of
Taking" from English into	2013.	Medicine.
Spanish.		

OBJECTIVES	INDICATORS	RESULTS
Specific Objective: 2 To	The translation process is	The whole translation has
contribute to the Department	finished following the steps,	been finished in 6 months
of Linguistics and Languages	procedures, correction and	and delivered to the
with the development of a	edition from September 2012	Department of Medicine.
glossary of technical medical	to September 2013.	
terms.		

OBJECTIVES	INDICATORS	RESULTS
Specific Objective: 3 –	The technical information	The technical information
To use, reflect upon and	was distinguished before	has been recognized and
describe the stages of a	translating.	translated.
thorough and professional translation process.	-The translation was described in detail in its different stages	-The translation process has been developed, describing each stage in
	unificient suges.	detail.

OBJECTIVES	INDICATORS	RESULTS
Specific Objective: 4. –	During the whole	The information has been
To analyze critically	translation process we have	recognized following the
different methods of	used different and specific	translation procedures.
translation and demonstrate	types of translation	
their particular utility for	according to the needs of	
our work.	the book. For example:	
	Literal, Transposition,	
	Modulation and Modified	
	translation.	

3.1.5 Action strategies

For the action strategies we have been considered some techniques applied in two phases of the Supervised Project. The first stage is about the translation process in which translation, techniques, methods and procedures were taken into account for translating the medical book. The second stage is about the elaboration of the glossary for the Department of Linguistics and Languages.

3.1.5.1 Phase of the translation process

This phase shows the whole translation process, for example: techniques, methods and procedures used in the different stages.

According to the requirements of the book, we decided to follow a group of stages for the development of this work; these stages reflect all the translation process, which was designed by the students who developed this work.

3.1.5.1.1 Activities:

During the process of this project we have developed different activities in order to fulfill the objectives. Following the steps to make this more precised.

3.1.5.2. Objectives:

This work is entirely designed to contribute to the Medicine Department in the translation of its English written material into Spanish.

3.1.5.3. Planning:

For the development process of this work we have followed these steps:

3.1.5.3.1. Recognition of the information:

The whole written book has been translated from English into Spanish language.

3.1.5.3.2. Recognition of the technical terminology:

Once we got the written English book, we have verified the technical terminology, and we have developed a glossary in which we classified the Medicine technical terms following an alphabetical order.

3.1.5.3.3. Translation of the first draft:

In first place, we have translated the book by the use of the different translation techniques but the ones we have used for this work are: Literal, Modified, Transposition and Modulation as the book requires.

3.1.5.3.4. Review of the first draft:

After, we finished the translation of the first draft; we had to review to make sure the translated text did not lose the real meaning and keep the content of the original information.

3.1.5.3.5. Review of the first draft by another translator

The translator Lic. Jacqueline Auza Santi (tutor of the Supervised Project in the Department of Linguistics) has reviewed and corrected the first draft.

3.1.5.3.6. Feedback on the translation

The students (translators) and tutor have reviewed the translation of the first draft all together, in order to share ideas and opinions about the translation process that has been developed.

3.1.5.3.7. Correction of the translation

Once the corrections have been studied, we have proceeded to correct them, taking into account that corrections must be faithful to the book written in the L1.

3.1.5.3.8. Revising of the translation

We have reviewed and analyzed the whole translation and the corrections we made.

3.1.5.3.9. Feedback of the translation

This is a team work in which the tutor and translators have discussed and commented about the translation and all the last improvements and modifications that have been done.

3.1.5.3.10. Editing

Finally, we have edited the translated text; it means that we checked the original written information and compared it to the current translation.

3.1.6 Work Planning

The purpose of this work has been designed in order to show and mention the activities and the different stages developed during the whole process of translation and application of the Supervised Project.

For this purpose, we took into account: the sequence of activities, method, resources, moment and time, and the students who developed the project itself. It is also important to mention that all these aspects have been related to the achievement of objectives in every stage of the process of translation.

3.1.6.1 Work Planning Structure

In the Work Planning Structure we have explained the main points of the translation process through the Action Plan Chart. All these important elements are related to the specific objectives of our work:

3.1.6.1.1. Specific objectives

For every stage of the process of translation we determined our objectives and explained every step through the activities, methods, resources, moment and students in charge of translation. Our objectives explain the goals we wanted to achieve in every stage that is why we describe these objectives as follows:

-To translate all the written material from English into Spanish language in a systematic way.

-To recognize the book information through reading.

-To recognize the Medicine technical terminology.

-To translate the first edition.

-To review the translation.

-To edit the written information that has been translated.

-To elaborate a glossary that incorporates all the Medicine technical terms found in every stage of the translation process.

3.1.6.1.2. Activities

All the activities developed during every stage of the translation process are explained in detail as follows:

-Reading books related to the translation field.

-Taking courses related to the medical terminology.

-Beginning of the translation process on September 10th, 2012.

-Application of the translation techniques.

At the beginning students classified all the 18 chapters of the book and decided who had the responsibility for translating every corresponding chapter. It is important to mention that there is no specific reason for this purpose; it means that the classification of chapters and the students in charge of translating them did not follow any kind of rule or suggestion for doing this, these procedures were chosen at random. At first, students translate their corresponding chapters by their own, but it is necessary to bear in mind, that all translations are reviewed and once they were corrected by the application of the Review Process Stages, we proceeded to develop the final edition.

The following chart shows all the chapters translated, the delivery dates and the name of the translators.

Chapters	Delivery Date	Translator
<i>Chapter 1 (19 pages)</i> An Overview of Physical Examination and History Taking	1 st delivery, Monday, September 24,2012 (Complete chapter)	Wendy Sharon Flores Segalini
<i>Chapter 2 (37 pages)</i> Interviewing and the Health History	1 st delivery, Monday, September 24, 2012 (1 st part of the chapter 2)	Claudia Chambi Ortiz
<i>Chapter 3 (34 pages)</i> Beginning the Physical Examination: General Survey and Vital Signs	2 nd delivery, Monday, October 8, 2012 (Complete chapter)	Wendy Sharon Flores Segalini
<i>Chapter 2 (37 pages)</i> Interviewing and the Health History	2 nd delivery, Monday, October 8, 2012 (2 nd part of the chapter 2)	Claudia Chambi Ortiz
<i>Chapter 4 (13 pages)</i> The Skin	2 nd delivery, Monday, October 8, 2012 (1 st part of the chapter 4)	Claudia Chambi Ortiz
<i>Chapter 5 (93 pages)</i> The Head and Neck	3 rd delivery, Monday, October 22, 2012 (1 st part of the chapter 5)	Wendy Sharon Flores Segalini

Chapter 4 (13 pages)		
The Skin	3 rd delivery, Monday, October 22, 2012	Claudia Chambi Ortiz
	$(2^{nd} \text{ part of the chapter 4})$	
Chapter 6 (33 pages)		
The Thorax and Lungs	3 rd delivery, Monday, October 22, 2012	Claudia Chambi Ortiz
	(1 st part of the chapter 6)	
Chapter 5 (93 pages)		
The Head and Neck	4 th delivery, Monday, November 5, 2012	Wendy Sharon
	$(2^{nd} \text{ part of the chapter 5})$	Tioles Segunin
Chapter 6 (33 pages)		
The Thorax and Lungs	4 th delivery, Monday, November 5, 2012	Claudia Chambi Ortiz
	$(2^{nd} \text{ part of the chapter 6})$	
Chapter 8 (18 pages)		
The Breasts and Axillae	4 th delivery, Monday, November 5, 2012	Claudia Chambi Ortiz
	(Complete chapter)	
Chapter 5 (93 pages)		
The Head and Neck	5 th delivery, Monday, November 19, 2012	Wendy Sharon Flores Segalini
	(3 rd part of the chapter 5)	
	Delivered in 20-11-2012	

Chapter 7 (50 pages)		
The Cardiovascular System	5 th delivery, Monday, November 19, 2012	Claudia Chambi Ortiz
	$(1^{st} part of the chapter 7)$	
	Delivered in November 20, 2012	
Chapter 7 (50 pages)		
The Cardiovascular System	6 th delivery, Monday, December 3, 2012	Claudia Chambi Ortiz
	$(2^{nd} \text{ part of the chapter 7})$	
Chapter 9 (49 pages)		
The Abdomen	6 th delivery, Monday, December 3,	Wendy Sharon
	2012 (1 st part of the chapter 9)	Flores Segalini
Chapter 9 (49 pages)		
The Abdomen	7 th delivery, Monday, December	Wendy Sharon
	17,2012	Flores Segalini
	$(2^{nd} \text{ part of the chapter 9})$	
Chapter 10 (15 pages)		
Male Genitalia and Hernias	7 th delivery, Monday, December	Wendy Sharon
	17,2012	Flores Segalini
	(Complete chapter)	
Chapter 11 (25 pages)		
Female Genitalia	7 th delivery, Monday, December 17, 2012	Claudia Chambi Ortiz

	(Complete chapter)	
<i>Chapter 12 (17 pages)</i> The Pregnant Woman	8 th delivery, Sunday, January 27, 2013 (Complete chapter)	Claudia Chambi Ortiz
<i>Chapter 13 (12 pages)</i> The Anus, Rectum and Prostate	8 th delivery, Sunday, January 27, 2013 (Complete chapter)	Wendy Sharon Flores Segalini
<i>Chapter 14 (23 pages)</i> The Peripheral Vascular System	8 th delivery, Sunday, January 27, 2013 (Complete chapter)	Wendy Sharon Flores Segalini
Chapter 17 (158 pages) Assessing Children: Infancy Through Adolescence	8 th delivery, Sunday, January 27, 2013 (1st part of the chapter 17) Translator delivered the first 38 pages.	Claudia Chambi Ortiz
Chapter 17 (158 pages) Assessing Children: Infancy Through Adolescence	9 th delivery, Sunday, February 10, 2013 (2 nd part of the chapter del 17)	Wendy Sharon Flores Segalini

Chapter 16 (86 pages)		
The Nervous System	9 th delivery, Sunday, February 10, 2013	Claudia Chambi Ortiz
	(1 st part of the chapter 16)	
Chapter 17 (158 pages)		
Assessing Children: Infancy Through Adolescence	10 th delivery, Sunday, February 24,2013	Wendy Sharon Flores Segalini
	(3 rd part of the chapter 17)	
<i>Chapter 16 (86 pages)</i> The Nervous System	10 th delivery, Sunday, February 24, 2013	Claudia Chambi Ortiz
	$(2^{nd} \text{ part of the chapter 16})$	
Chapter 17 (158 pages) Assessing Children: Infancy Through Adolescence	11 th delivery, Sunday, March 10, 2013 (4 th part of the chapter 17)	Wendy Sharon Flores Segalini
Chapter 15 (67 pages)		
The Musculoskeletal System	 11th delivery, Sunday, March 10, 2013 (1st part of the chapter 15) 	Claudia Chambi Ortiz
Chapter 18 (19 pages)		
Clinical Reasoning, Assessment and Plan	12 th delivery, Sunday, March 24, 2013 (Complete chapter)	Wendy Sharon Flores Segalini

Chapter 15 (67 pages)	12 th delivery, Sunday, March 24,	Claudia Chambi Ortiz
The Musculoskeletal System	2013 (2 nd part of the chapter 15)	

3.1.6.1.2.1. Other activities

Other activities carried out were:

-Review of the translation.

-Correction of the translation.

-Development of a glossary that incorporates all the Medicine technical terms found in every stage of the translation process.

-Meetings between the translators in order to discuss issues about Technical terminology and Correction of the translations.

-Meetings among translators and tutor in order to discuss issues about the development of the Supervised Project Inform.

-Meetings among translators and the Principal of the Department of Medicine in order to discuss issues about the translations and the reports each 2 months.

-Development of the Supervised Project Report.

3.1.6.1.3. Methodology

In the methodology of this work we describe all the procedures, methods and techniques in order to achieve the objectives and develop all the activities related to the process of translation and the development of the Supervised Project.

Now we proceed to explain the procedures, methods and techniques used in every stage of the translation process:

The translation of the Medicine book from English into Spanish language was developed by the application of the following translation techniques:

-Word for word: As we have seen before, this translation procedure is rendering of one text to another. This procedure is also mainly used for scientific, technical or legal texts. Technical texts like the Medicine texts are necessarily needed to be translated using procedures like this. Translating the Medicine book we found many words, paragraphs and the like when word for word procedure was needed. Here we add some of the common examples.

Example 1:

(Taken from Chapter 3: PDF page 61 in English version / page 56 in Spanish version)

Source Language Text:

Remember that carbohydrates and protein furnish 4 calories per gram, and fat yields 9 calories per gram.

Target Language Text:

Recuerde que los carbohidratos y proteínas aportan 4 calorías por gramo, y la grasa rinde 9 calorías por gramo.



The example shows us a word for word translation, as we can see this procedure is completely understandable in the whole sentence, because it is translated by its most common meaning. In this case, the example has a simple construction and there was not the necessity of using another type of translation.

Example 2:

(Taken from Chapter 3: PDF page 63 in English version / page 57 in Spanish version)

Source Language Text:

Weight loss is an important symptom that has many causes.

Target Language Text:

La pérdida de peso es un síntoma importante que tiene muchas causas.

Analysis of Translation:



As we can see, in the example 2, we just added the article "La" due to in spanish languange it is necessary to put it before a noun to announce it.

The first example shows the transference made from one language to another. The source language word translated into the target language using the word for word procedure. The examples respect the grammar and use the appropriate procedure to keep the meaning and respect the grammatical rules. The medical terms we found were highly reviewed many times to make sure the translation procedure was precise.

-Literal: As it has been defined before, the literal translation is the translation from one text to another. This kind of procedure has been very useful for scientific areas. That is why; it is worth using this procedure to translate this in medical translation for the exactitude information we are to translate.

As Newmark (1995:101) says: this kind of translation goes beyond word for word translation, since the SL gramatical constructions are changed to their nearest TL equivalence.

Example 1:

(Taken from Chapter 5: PDF page 115 in English version / page 109 in Spanish version)

Source Language Text:

Knowing this anatomy helps to locate and describe physical findings.

Target Language Text:

El conocimiento de esta anatomía ayuda a localizar y describir los hallazgos físicos.



In this example, we can see the noun "knowing" does not need the article "the" as the Spanish language does, when we begin any paragraph. On the other hand, the preposition "de" was added in order to make it understandable.

As we have seen, this short sentence was translated using the literal translation. We used this procedure to keep the meaning, and basically we were allowed to respect the grammar rules.

Example 2:

(Taken from Chapter 1: PDF page 1 in English version / page 1 in Spanish version)

Source Language Text:

Empathic listening; the ability to interview patients of all ages, moods, and backgrounds; the techniques for examining the different body systems; and, finally, the process of clinical reasoning.

Target Language Text:

Escucha empática: la habilidad de entrevistar a pacientes de todas las edades, estados de ánimo y orígenes, las técnicas para explorar los diferentes sistemas del cuerpo y finalmente, el proceso de razonamiento clínico.





As we can see, we have three grammatical constructions that had to be switched in their positions: "Emphatic listening" as "escucha empática"; "Body System" as "sistemas del cuerpo"; and "Clinical reasoning" as "Razonamiento clínico".

The example indicates the procedure in action that we used to translate many paragraphs as this. We considered the syntax for both languages to look for the same equivalence. This helps us to translate with exactitude the information provided in this book. Then, translating this section was really successful when we use the appropriate procedure.

Example 3:

(Taken from Chapter 3: PDF page 59 in English version / page 54 in Spanish version)

Source Language Text:

These data provide information about the patient's nutritional status and amount of body fat.

Target Language Text:

Estos datos le proporcionarán información acerca del estado nutricional del paciente y la cantidad de grasa corporal.



In the following example, we can find addition of an indirect object "le", definite article "la", and the contraction "del" which in Spanish has this structure "preposition de + definite article el".

This example shows the correspondence for each word in both languages. Then translation comes simply when the procedure is used effectively. The translation for this paragraph using the literal procedure results interesting considering the grammar rules for both languages and keep the meaning for both as well.

Example 4:

(Taken from Chapter 6: PDF page 214 in English version / page 213 in Spanish version)

Source Language Text:

Locations on the Chest. Be familiar with general anatomic terms used to locate chest findings, such as:

Supraclavicular—above the clavicles Infraclavicular—below the clavicles Interscapular—between the scapulae Infrascapular—below the scapula Bases of the lungs—the lowermost portions

Target Language Text:

Localizaciones torácicas. Aprenda los términos anatómicos generales que se utiliza para localizar los signos torácicos, como:

Supraclavicular – Por encima de las clavículas

Infraclavicular– Por debajo de las clavículas

Interescapular -- Entre las escápulas

Infraescapular-Por debajo de la escápula

Bases pulmonares -- las porciones más bajas

Analysis of Translation:



In this example, we can see the frequent use of compound prepositions in the TL text such as: "Por encima de, Por debajo de".

-Modified:

The modified translation has to do with the use of sinonyms. According to the Oxford advanced learner's dictionary "A synonym is a word or expression that has the same meaning as another in the same language" for example 'big' and 'large' are synonyms (2000: 1319). In this sense, it is possible to change a word or expression for another which has the same or almost the same meaning in the same language. In the case of our translation work, we have used a lot this method of translation because we had to look for synonyms for many words in order to make our translation look more elaborated instead of using the first meaning of a word, because we noticed that it is possible to change one term for another that expresses the same meaning. Now we proceed to exemplify how this type of translation works.

Example 1:

(*Taken from Chapter 1: PDF page 1 in English version / page 1 in Spanish version*)

Source Language Text:

This chapter provides a road map to clinical proficiency in three critical areas: the health history, the physical examination, and the written record, or "write-up."

Target Language Text:

Este capítulo brinda un mapa de dirección para alcanzar la competencia clínica en tres áreas importantes: el historial médico, la exploración física y el registro escrito o "notas."





In this sentence, we can observe the use of synonyms in the following examples:

- The conjugated verb 'provide' was translated into Spanish as the conjugated verb 'brinda', and the first meaning of this verb is 'proporcionar'.

-The words 'road map' were translated as 'mapa de dirección', in this case, the literal translation would be 'mapa de caminos'. Here, we had to look for a different synonym in order to understand better the context in which this sentence was written.

-The word 'proficiency' was translated as 'competencia' and its literal meaning is 'destreza', we looked for a very close meaning to reflect the same thought.

-The adjective 'critical' was translated into Spanish as 'importantes'. In this example, we can notice that we did not use the first meaning of the word which would be 'críticas', we prefered to use another that made more sense.

-The noun 'history' can have some meanings according to different purposes and fields of study. In the case of medicine, this word also can be used in two ways, but with the same meaning. For example: 'historia or historial'. In our translation, we prefered to translate this term as 'historial' because in our context, doctors use more this term.

-The noun 'examination' was translated as 'exploración', but its literal translation is 'examinación', and it does not exist as such in the medical language, that is why the word employed is 'exploración'.

-The noun 'write-up' literally means 'escribir, describir' it is used as a phrasal verb, but as a noun it was translated as 'notas', and it also can be translated as 'apuntes' which is another synonym that denotes the same meaning.

-There are also some words in the TL text which cannot be found in the SL text and they are: the verb 'alcanzar' and the definite article 'la'.

-In this sentence, it is also possible to find other types of translation as: word for word and literal translation.

Example 2:

(Taken from Chapter 3: PDF page 63 in English version / page 58 in Spanish version)

Source Language Text:

Poverty, old age, social isolation, physical disability, emotional or mental impairment, lack of teeth, ill-fitting dentures, alcoholism, and drug abuse increase the likelihood of malnutrition.

Target Language Text:

La pobreza, vejez, aislamiento social, discapacidad física, alteraciones emocionales o mentales, carencia de dientes, dentaduras postizas que no encajan bien, alcoholismo, y el abuso de drogas incrementan el riesgo de desnutrición.

Analysis of Translation:



In this sentence, we can observe the following findings:

-The existence of words in the TL text which do not exist in the original text in English. For example: the definite articles 'la, el'.

-The noun 'disability' was translated as 'discapacidad' and its literal translation is 'incapacidad', we can notice that the meaning is the same, it did not change.

-The noun 'impairment', its literal translation is 'deterioro', but it was translated in plural as 'alteraciones'.

-The words 'ill-fitting' used as an adjective in the SL text, literally mean 'mal fijado', but it was translated in plural into the TL text as 'que no encajan bien' because the next word is a noun in plural.

- The noun 'likelihood' literally means 'probabilidad', but it was translated as 'riesgo', which is not the closest meaning, but represent the same thought in context.

Example 3:

(Taken from Chapter 9: PDF page 319 in English version / page 320 in Spanish version)

Source Language Text:

Bladder expansion stimulates contraction of bladder smooth muscle, the *detrusor muscle*, at relatively low pressures. Rising pressure in the bladder triggers the conscious urge to void.

Target Language Text:

La expansión vesical estimula la contracción del músculo liso de la vejiga, el *músculo detrusor*, con presiones relativamente bajas. La presión creciente de la vejiga desencadena el impulso consciente de vaciarse.


el músculo detrusor, con presiones relativamente bajas.

Rising pressure in the bladder triggers La presión creciente de la vejiga desencadena

the conscious urge to void. el impulso consciente de vaciarse.

In this example, we can find two sentences, now we proceed to analyze the findings.

- There are five words in the TL text which are not in the SL text and they are: the definite article 'la' which was repeated four times in both sentences, and the preposition 'de'.

-The noun 'bladder' (used as an adjective in the SL text) can be translated literally as 'vejiga', but in the TL text was translated as an adjective 'vesical', here it is possible to see a different use of the language, which is to change the original type of word.

-The preposition 'at' literally translated means 'en', but in the TL translation means 'con', which is not a common synonym for this preposition.

-The adjective 'Rising' literally means 'ascendente' and in the target text was translated as 'creciente', this example shows closest synonyms.

-The conjugated verb 'triggers' literally translated means 'disparar' that is why, we have changed the term into the conjugated verb 'desencadena' which can be understood better.

Example 4:

(*Taken from Chapter 9: PDF page 322 in English version / page 324 in Spanish version*)

Source Language Text:

Symptoms of blood loss such as light-headedness or syncope depend on the rate and volume of bleeding, and rarely appear until blood loss \geq 500 ml.

Target Language Text:

Los síntomas de la pérdida hemática, como el mareo o síncope dependen de la frecuencia y volumen de la hemorragia, y rara vez aparecen hasta que se da la pérdida hemática de \geq 500 ml.

Analysis of Translation:



In this sentence, it is possible to find these examples of modifications:

-Some words are present in the TL text and not in the SL text: definite articles in singular and plural 'los, la, el', the relative pronoun 'que', the reflexive verb 'darse'.

- The noun 'blood' (used as an adjective in the SL text), literally means 'sangre' and as an adjective would be 'sanguínea', but it was translated as 'hemática' also an adjective, it has the same meaning, but it is clear the use of synonyms.

-The compound noun 'light-headedness' was translated as 'mareo' and it can be also translated as 'vértigo'.

-The noun 'bleeding' literally means 'sangrado', but it was translated as 'hemorragia', both terms show the same meaning.

Example 5:

(Taken from Chapter 13: PDF page 426 in English version / page 434 in Spanish version)

Source Language Text:

The anal canal is demarcated from the rectum superiorly by a serrated line marking the change from skin to mucous membrane. This anorectal junction, often called the *pectinate* or *dentate line*, also denotes the boundary between somatic and visceral nerve supplies. It is readily visible on proctoscopic examination, but is not palpable.

Target Language Text:

El conducto anal está delimitado por el recto, en la parte superior, a través de una línea dentellada que marca la transición de la piel a la membrana mucosa. A menudo, esta unión anorrectal se denomina *línea pectínea* o *dentada*, también señala el límite entre las inervaciones somática y visceral. Se puede apreciar con facilidad en un examen proctoscópico, pero no se puede palpar.

Analysis of Translation:





This example has three sentences, let's see the findings in each one.

-The omission of words in both texts: definite and undefinite articles in the SL text 'la, lasun' and in the TL text 'the', the conjugated verb 'puede' which is not present in the SL text.

-The noun 'canal' which has the same form in the TL, but it was translated as 'conducto'.

-The adjective 'demarcated' literally translated would be 'demarcado', but we used the term 'delimitado'.

-The preposition 'from' means 'desde', but it was translated as the preposition 'por'.

-The adverb 'superiorly' can be translated as 'superiormente', but in the TL text it was necessary to look for a group of words in order to express the same meaning 'en la parte superior'.

-The preposition 'by' has the first literal meaning 'por', and it was translated as 'a través de'.

-The adjective 'serrated' can have two synonyms 'serrada or dentellada' the last one was the term we used in the TL text.

-The verb 'marking' in gerund was translated using two words 'que marca' a relative pronoun and a conjugated verb.

-The noun 'change' can be literally translated as 'cambio', and it was translated as 'transición'.

-The verb 'called' was translated as 'se denomina', another synonym would be 'llamado'.

-The words 'nerve supplies' changed into one word 'inervaciones' which is a mixture of two meanings.

-The adverb 'readily' literally translated means 'facilmente', but its meaning in the TL text is 'con facilidad'.

-The adjective 'visible' was translated as a verb 'apreciar'.

-The noun 'examination' has different synonyms, a literal one is 'examinación', but it does not exist in Spanish as such, and 'exploración' a term used in medicine, in the TL text was translated as 'examen'.

-The adjective 'palpable' was translated as a verb 'palpar'.

In conclusion, we can observe that is possible to use this type of translation in order to change a text just in smaller units of language, it means just changing one term for another, but keeping the same meaning. In this way, the use of synonyms is very important for translators, so they can choose appropriate terms according to the needs of the text as in our case.

-Transposition: Before getting into the analysis of the sentences, we are required to remember definitions not to confuse terms and use the correct procedures. As we defined before transposition for Peter Newmark (1995: 122) is a translation procedure that involves a change in grammar from the source language (SL) to the target language (TL). And for Bell (1991:70) is the rendering of a SL element by TL element which are semantically, but not formally equivalent. In this sense, transposition is used as a method or procedure for smaller units of language and for bigger structures as the clauses. Some examples found in this project are:

Example 1:

(Taken from Chapter 5: PDF page 116 in English version / page 110 in Spanish version)

Source Language Text:

A film of *tear fluid* protects the conjunctiva and cornea from drying, inhibits microbial growth, and gives a smooth optical surface to the cornea.

Target Language Text:

La conjuntiva y la córnea son protegidas de la sequedad por una película de *líquido lagrimal*, que inhibe el crecimiento microbiano y brinda una superficie óptica lisa a la córnea.

Analysis of Translation:



In this example we can clearly appreciate the procedure used. The translation of this statement has the following characteristics: there is a kind of parallelism between the SL (Source Language) and TL (Target Language) text, it means, sentences have almost identical structures in both languages, but there is a visible change in position. In this sense, in the SL statement we can appreciate the use of the active voice and its structure is explained as follows:

Structure of the SL statement

noun phrase + verb + noun phrase + prepositional phrase

In the case of the TL statement we can notice the use of the passive voice, and it has the following structure:

Structure of the TL statement

noun phrase + verb + prepositional phrase + noun phrase

It is very important to mention that in the first part of the statement before the comma, it is clearly visible the use of the transposition procedure, but after the comma we can notice the use of different procedures of translation as for example word for word and literal translation. It is also important to take into account the following observations:

-In English, the adjective goes before the noun for example: tear fluid. But in Spanish the adjective goes after the noun for example: líquido lagrimal.

- In the English statement, the verb "protect" conjugated in third person singular as "protects" changed into the Spanish statement in a different verb that is "to be" in third person plural as "son" and the verb "protect" was changed into a plural adjective as "protegidas" because of the change into passive voice and the shifts in the first part of the sentence before the comma.

- In the English statement, the prepositional phrase "from drying" was translated into Spanish as "de la sequedad". The definite article "la" is not present in the SL statement.

- In the Spanish statement it is noticeable the use of the preposition "por" that helped us to change the active voice used in the English statement into passive voice in the Spanish statement.

-As we mentioned before, after the comma, it is possible to see the use of word for word translation because there was an interlineal translation with the TL immediately below the SL words, and the SL order was preserved, and the words were translated by their common meanings "to the cornea" "a la córnea". And literal translation because the translation of some words go beyond word for word translation since the SL grammatical constructions

are translated into the TL nearest equivalence "microbial growth" "crecimiento microbiano", "smooth optical surface" "superficie óptica lisa".

-And it is also possible to see the absence of some words in the SL statement for example: the preposition "por", the relative pronoun "que", and the definite article "el".

Example 2:

(Taken from Chapter 4: PDF page 95 in English version / page 89 in Spanish version)

Source Language Text:

The epidermis depends on the underlying *dermis* for its nutrition. The dermis is well supplied with blood. It contains connective tissue, sebaceous glands, sweat glands, and hair follicles. It merges below with *subcutaneous tissue*, or *adipose*, also known as fat.

Target Language Text:

La epidermis se nutre a partir de la *dermis* subyacente. La *dermis* está bien irrigada y contiene tejido conjuntivo, glándulas sebáceas, glándulas sudoríparas, y folículos pilosos. Se une por debajo, al tejido *subcutáneo* o *adiposo*, también conocido como grasa.

Analysis of Translation:





This example has four sentences. In the first sentence, it is possible to notice the change in position from one language to the other and that is why the use of the transposition procedure was appropriate, and it has the following structure:

<u>Structure of the SL statement</u> noun phrase + verb + noun phrase + prepositional phrase

In the case of the TL statement we can notice the following structure:

Structure of the TL statement

noun phrase + verb + prepositional phrase + noun phrase

In this first sentence, it is important to see that the positions of verbs are totally different in both languages, as well as the meanings of verbs, for example: the verb "depends on" was translated as a prepositional phrase "a partir de", and the prepositional phrase "for its nutrition" was translated as a verb "se nutre".

In the case of the second, third and fourth sentence, we can observe a parallelism in both languages, for example there is the same structure in the SL as well as in the TL, but it is important to observe that some elements exchange positions at a grammatical level, especially in relation to the position of adjectives, for example: in English adjectives go before the nouns and in Spanish adjectives go after the noun and in these sentences, it is clearly observable this type of transposition of these elements as well as smaller units, but the arrows show that the grammatical form is maintained. Let's see other examples:

-In the second sentence, the words "supplied with blood" were translated into Spanish as "irrigada" in this case there is a reduction and omission of the preposition "with" and the noun "blood".

-In the third sentence, there is also the omission of the pronoun "It" in Spanish because in this language it is possible to omit pronouns, because the conjugation of verbs let us know about who we are talking about. And also in the Spanish translation we can see the addition of the conjunction "y" which was not in the English version of this sentence.

-In the fourth sentence, there is an omission of the pronoun "It" in the Spanish sentence, and the verb "merges" was translated without paying attention to the first denotative meaning as "se une", and also the preposition "below" in Spanish was translated as a compound preposition "por debajo" and the preposition "with" was translated into Spanish as "al" which is not so common.

Example 3:

(*Taken from Chapter 9: PDF page 318 in English version / page 320 in Spanish version*)

Source Language Text:

The abdominal cavity extends up under the rib cage to the dome of the diaphragm.

Target Language Text:

La cavidad abdominal se extiende por arriba hasta la bóveda diafragmática bajo la caja torácica.

Analysis of Translation:

The abdominal cavity extends up under the rib cage to the dome of the diaphragm. La cavidad abdominal se extiende por arriba hasta la bóveda diafragmática bajo la caja torácica. In this example, it is possible to observe the clear use of transposition in the two existent prepositional phrases. Let's see the structure of this sentence in both languages:

<u>Structure of the SL statement</u>

noun phrase + verb + prepositional phrase + prepositional phrase

In the case of the TL statement we can notice the following structure:

Structure of the TL statement

noun phrase + verb + prepositional phrase + prepositional phrase

Although, in these two sentences in both languages, we can see the same structures, it is important to take into account that there is a change in position of the prepositional phrases as we mentioned above. An also we can notice some other changes explained as follows:

-The use of the verb "extends up" in the English statement and translated as "se extiende por arriba" in the Spanish statement. Here we can say that in Spanish we use a reflexive verb that is "extenderse".

-In the first prepositional phrase "under the rib cage" in English, translated into Spanish as "bajo la caja torácica", it is possible to see that the term "cage" "caja" is not the first meaning of the word in Spanish, so we had to find a proper term represented in the Spanish language instead of saying "jaula" which is the denotative meaning of the word.

-In the case of the other prepositional phrase "to the dome of the diaphragm" translated as "hasta la bóveda diafragmática", we can observe that the noun "diaphragm" has been changed into an adjective.

Example 4:

(Taken from Chapter 13: PDF page 425 in English version / page 433 in Spanish version)

Source Language Text:

The direction of the anal canal on a line roughly between anus and umbilicus should be noted carefully.

Target Language Text:

Observe cuidadosamente la dirección del conducto anal sobre una línea comprendida entre el ano y el ombligo.

Analysis of Translation:



<u>el ombligo</u>.

In this example, there was also the necessity to use the transposition at a grammatical level. Three grammatical forms were changed concerning to the position of adjectives, and there is a change of place of noun phrases, verbs, and prepositional phrases as well. The structure of the sentence is explained as follows:

> <u>Structure of the SL statement</u> noun phrase + prepositional phrase + verb

In the case of the TL statement we can notice the following structure:

Structure of the TL statement

verb+ noun phrase + prepositional phrase

Other important structures to be analyzed are:

-In the noun phrase "The direction of the anal canal" translated as "la dirección del conducto anal" we can notice a parallelism of terms in both languages, but it is clear the difference in the positions of adjectives in English and Spanish that shows transposition in smaller structures of the sentences.

-In the prepositional phrase "on a line roughly between anus and umbilicus" translated as "sobre una línea comprendida entre el ano y el ombligo", it is posssible to observe the diffrence in meaning of the term "roughly" and "comprendida" in which, it adopted a different meaning in Spanish, but it did not lose the correct meaning to be expressed.

-In the verb phrase "should be noted carefully" translated as "Observe cuidadosamente" we can notice the omission of the modal verb "should" and the verb "be" replaced by just one verb "Observe".

In this way, transposition was one of the most important types of translation to be used in order to have an appropriate equivalence between the SL and the TL texts. And as transposition is a very indispensable procedure, here it was used as an optional or sometimes obligatory way, depending on the SL text and its context, but always whenever it was possible to be used.

-Modulation: A concept already established defines that modulation is the message's form altered by a change in perspective or semantics. Or in words of Peter Newmark:

"As I see, the general concept, since it is a super-ordinate term covering almost everything beyond literal translation is not useful as it stands. However, the 'negated contrary' that I prefer to call positive or for double negative (or double negative for positive) is a concrete translation procedure which can be applied in principle to any action (verb) or quality adjective or adverb. (Newmark Peter, Manual de Traducción, 1995, p. 125)

Thus, modulation is a translation method consisting in throwing a different light on, or looking from a different angle at, the lines to be translated. In the medical translation we found some words and sentences that required this procedure. Some basic examples found are:

Example 1:

(*Taken from Chapter 1: PDF page 1 in English version / page 1 in Spanish version*)

Source Language Text:

Over the course of becoming an accomplished clinician, you will polish these important relational and clinical skills for a lifetime.

Target Language Text:

Conforme vaya forjándose como un médico experto, irá perfeccionando estas facultades tan importantes durante su larga trayectoria clínica.

Analysis of Translation:



In this example, the use of modulation is very clear, because the denotative meanings of the words and phrases in the SL have changed in the TL, but they did not change their real meanings, it means, that we kept the meaning that the author originally expressed, we transmitted the author's thought and the main idea of the text, what is really important at the moment of translating and using this type of translation. In order to understand better this position let's exemplify this perspective with some examples found in this sentence:

- The phrase "Over the course of becoming" was translated as "*Conforme vaya forjándose como*" this example shows clearly the use of this procedure, in the SL we have a prepositional phrase, and in the TL we do not have any preposition, and we can observe the use of the subjunctive. If we had translated this sentence using the literal translation in the TL, the translation would had been totally different "En el transcurso de llegar a ser", but we wanted to go beyond, trying to express the same meaning but using different, elaborated and more formal words.

-In the sentence, it is also possible to see that some words were translated using different words and not the first literal meanings of words. For example: "accomplished clinician" was translated as "médico experto" and the adjective "accomplished" in Spanish means "realizado, consumado" and we preferred to use the adjective "experto" because this word can be understood better by the readers of the medical textbook than the other adjectives.

-In the TL, we can notice the omission of some words, for example: the personal pronoun "you" it was not translated into Spanish, because in this language it is possible to omit pronouns as they are represented by the conjugation of verbs, as well as the adjective "relational" and the conjunction "and".

-In the SL there is also omission of words, for example: the adverb "tan" this word is present in the Spanish translation but not in the English version.

-The use of the modal verb "will" used in English in order to express future tense, it is implicit in Spanish conjugation of verbs, but in the case of this sentence was changed, in the SL sentence we have the verb in future tense "will polish" and it was translated into the TL as "irá perfeccionando", here we can notice the use of the verb "ir" which is not expressed in the original English versión, as well as the verb in gerund "perfeccionando", the verb "polish" means "pulir", the first and literal meaning was changed in order to improve the translation in the TL.

-Other words that have changed totally during the translation into the TL are:

In the SL text "skills" was translated as "facultades", and the literal meaning is "habilidades" and we appealed to a different meaning without changing the real meaning.

In the SL text, the preposition "for" was translated into TL text as the preposition "durante" and its literal translation in Spanish is "por/para", different in both languages, but in the translation it was necessary to change because otherwise the sentence would not have any sense.

The indefinite article "a" in the SL was translated as a possessive adjective "su" because the modulation procedure required to do it.

The noun "lifetime" translated as "larga trayectoria" shows how in modulation some words can change by others and in this case in two words an adjective and a noun.

Example 2:

(Taken from Chapter 1: PDF page 1 in English version / page 1 in Spanish version)

Source Language Text:

As you enter the realm of patient assessment, you begin integrating the essential elements of clinical care:

Target Language Text:

Al ingresar en el campo de evaluación del paciente, usted comenzará a relacionar los elementos fundamentales que conforman el cuidado médico:

Analysis of Translation:



The second example also shows clearly the use of the modulation procedure. Now we proceed to analyze the findings in this sentence:

-The conjuction "As" was translated as the preposition "Al" so it can work with the verb "ingresar" because in Spanish, it is normal to see verbs next to prepositions in order to form infinitive meanings.

-The noun "realm" was translated as "campo" and not as "región" which is the literal meaning, because it is related to an area of study about the medical field and not about a place in a country.

-The verb "begin" in the SL was conjugated in present tense, while in the TL was translated as "comenzará" in future tense because of the change into modulation type of translation.

-The verb "begin integrating" compound by a verb + verb in gerund in the SL text, was translated into Spanish as "comenzará a relacionar", here we can notice the use of a very peculiar structure in Spanish called "perífrasis verbal" which is formed by an auxiliary verb + preposition + infinitive verb. In this sentence, we can appreciate that in the SL sentence the verb is in present continuous, but in the TL sentence the verb is in future tense.

-In the SL text as well as in the TL text, we can find also omission of words, the absent words in the TL text are: the personal pronoun "you". The words that are not present in the SL text are: the preposition "en", the preposition "del" the contracted form of "de + el" (preposition + definite article), and the relative pronoun "que" and the conjugated verb "conforman".

-And it is also present those words translated into Spanish using synonyms, such as: the verb "enter" \rightarrow "ingresar" and not "entrar", "essential" \rightarrow "fundamentales" and not "esenciales" these last words were added as a short alteration to give a complete and more understandable idea.

Example 3:

(Taken from Chapter 10: PDF page 373 in English version / page 378 in Spanish version)

Source Language Text:

A good genital examination can be done with the patient either standing or supine.

Target Language Text:

Para una buena exploración genital es necesario que el paciente esté de pie o en posición de decúbito supino.

Analysis of Translation:



If we use the literal translation in order to translate this sentence originally written in English (*A good genital examination can be done with the patient either standing or supine.*), we could notice that the translation would look totally different in the target language (*Una buena exploración genital puede ser hecha con el paciente de pie o en supino*), but as we used the modulation procedure, the sentence changed in some sense. Let's see some examples in order to exemplify these changes.

- The omission of words in the TL sentence: "either" is not present in the target text.

-The omission of words in the SL sentence: the preposition "para", the conjugated verb in subjunctive "esté" are not present in the source text.

-The noun "examination" in Spanish literally means "examinación" but it does not exist as such in the medical field, that is why, it was changed into "exploración" the actual term used by doctors.

-The translation of "can be done" (modal verb in present tense + verb in infinitive + verb in preterite) in the source text, was translated into the target text as "es necesario" (verb in present tense + adjective but used as a impersonal way).

- In the SL text, the preposition "with" was translated as the relative pronoun "que" because of the change into the modulation procedure, and the original sentence was changed into a subordinating sentence as well.

-The word "supine" was translated as "en posición de decúbito supino" for formal purposes and style of translation.

To conclude, all these sentences were translated with the method of modulation, because we felt the necessity to go beyond the other types of translation, but it was possible just when the text let us to do it. During the translation of these sentences we tried to keep the meanings of words as well as the author's thoughts and the real meaning of the source text, but expressed in different words and paying attention to the author's wishes at the moment of writing the original text. In this way, it is important to say that the implementation of this type of translation method is possible at different levels of language.

-Acronyms and Abbreviations

An acronym is a word formed from the initial letters of a group of words, whereas an abbreviation is a shortened form of a word or phrase. Richard & Hohulin (1982: 27) define an abbreviation as: "*a shortened form of a word or a phrase, but not necessarily only the initial letter or letters*." They defined an acronym as combining the initial letter or letters of each of the elements making up the complex lexical units.

Acronyms and abbreviations in Roman script are almost always written in capital letters. For example: WHO is the acronym for the World Health Organisation. AIBA is the abbreviation for aminoisobutyric acid.

Acronyms and abbreviations are very common in English, especially in the medical field, and many medical terms are written as acronyms and abbreviations. Kasprowicz (2012) argues that medical English employs a great many abbreviations and acronyms. He believes that the popularity of such shortened forms in medical language is due to the historical tradition of the language of medicine, and the economy in space and time they provide. For common English medical acronyms, a translator may use a direct translation of the English name. For example:

AIDS (Acquired Immunodeficiency Syndrome) Is translated into Spanish as:

SIDA (Síndrome de Inmunodeficiencia Adquirida)

Monolingual medical dictionaries are useful in order to check the meanings of some acronyms and abbreviations which cannot be found in bilingual dictionaries such as English-Spanish dictionaries. But there is a problem with translating acronyms and abbreviations, which is that a single term may account for different semantic references. In this regard, Byrne (2012: 51) points out:

"abbreviations and acronyms, which are just as specialized, and which may have a number of different meanings depends on the subject, the context or even the company or organization which produces the text."

For instance, the acronym:

FMD

Can be used to refer to:

Family Medical Doctor

Now we offer some examples found in the medical textbook:

ENGLISH

- *1.-* **ABI** (Ankle–Brachial Index):
- 2.- ADLs (Activities of Daily Living):
- 3.- BMI (Body Mass Index):
- 4.- **BP** (Blood Pressure):

5.-CAGE ((cutdown?), (Annoyed by criticism?), Guilt about drinking?) (Eye opener drinks?):

6.-COPD (Chronic Obstructive Pulmonary Disease): 7.- CVA (Costovertebral Angle):

8.- **CPR** (Cardiopulmonary Resuscitation):

- 9.- **DES** (Diethylstilbestrol):
- 10.- ECG (Electrocardiogram):
- 11.- EDD (Expected Date of Delivery):
- 12.- $\mathbf{F} \rightarrow \mathbf{N}$ (Finger-to-Nose):
- 13.- FHR (Fetal Heart Rate):
- *14.-* **H** \rightarrow **S** (Heel-to-Shin):
- 15.- HEENT (Head, Eyes, Ears, Nose, Throat):
- 16.- **HIV** (Human Immunodeficiency Virus):
- 17.- **HR** (Heart Rate):
- 18.- **JVP** (Jugular Venous Pressure):
- 19.- PND (Paroxysmal Nocturnal Dyspnea):
- 20. **RDA** (Recommended Daily Allowance):
- 21.- **RR** (Respiratory rate):
- 22.- SBE (Self-Breast Examination):
- 23.- **SOAP** (Subjective, Objective, Assessment, and Plan):
- 24.- SPF (Sunscreen Protective Factor Index):
- 25.- STDs (Sexually Transmitted Diseases):

SPANISH

- *1.-* **IBT** (Índice Brazo -- Tobillo)
- 2.- AVDs (Actividades de la Vida Diaria)
- 3.- IMC (Índice de Masa Corporal)
- 4.- PA (Presión Arterial), TA (Tensión Arterial)
- 5.-CAGE (¿Desea "cortar" la dependencia?, ¿Le molestan las críticas?, ¿Se siente culpable por beber?, ¿Necesita beber por la mañana?)
- 6.-EPOC (Enfermedad Pulmonar Obstructiva Crónica)
- 7.- ACV (Ángulo Costovertebral)
- 8. RCP (Reanimación cardiopulmonar)
- 9.- **DES** (Dietilestilbestrol)
- 10.- ECG (Electrocardiograma)
- 11.- **FPP** (Fecha Probable del Parto)
- 12.- $\mathbf{D} \rightarrow \mathbf{N}$ (Dedo- Nariz)
- 13.- FCF (Frecuencia Cardíaca Fetal)
- 14.- $\mathbf{T} \rightarrow \mathbf{E}$ (Talón-Espinilla)
- 15.-HEENT (Cabeza, Ojos, Oídos, Nariz y Garganta)
- *16.-* **VIH** (Virus de la Inmunodeficiencia Humana)
- 17.- FC (Frecuencia Cardíaca)
- 18.- PVY (Presión Venosa Yugular)
- 19.- DPN (Disnea Paroxística Nocturna)
- 20.- ADR (Aportes Dietéticos Recomendados)
- 21.- **FR** (Frecuencia respiratoria)
- 22.- AEM (Autoexploración de la Mama)
- 23.- SOVP (Subjetivo, Objetivo, Valoración y Plan)
- 24.- FPS (Factor de Protección Solar)
- 25.- ETS (Enfermedades de Transmisión Sexual)

- Loan Words:

A loan word is a word or expression which is borrowed from another language. According to Larson (1984), a loan word is a word which is from another language and is unknown to most of the speakers of the receptor language. Loan words might include names of people, geographical areas and places.

The use of names is very common in medical terminology, for example, in the names of diseases, drugs and bacteria. Also in the medical field, translators sometimes encounter new expressions and words which do not have equivalents in the TL, so they borrow the English term following the transliteration process.

The examples found during the translation of the medical textbook are listed as follows:

ENGLISH	SPANISH
1 Acetaminophen:	1 Acetaminofén
2 Amenorrhea:	2 Amenorrea
3 Anisocoria:	3 Anisocoria
4 Arrhythmia:	4 Arritmia
5 Arthralgias:	5 Artralgias
6 Bradycardia:	6 Bradicardia
7 Cerumen:	7 Cerumen
8 Cortisol:	8 Cortisol
9 Cystocele:	9 Cistocele
10 Dialysis:	10 Diálisis
11 Diaphoresis:	11 Diaforesis
<i>12</i> Diarrhea:	12 Diarrea
<i>13</i> Diplopia:	13 Diplopía
14 Diverticulosis:	14 Diverticulosis
15 Dyspepsia:	15 Dispepsia
<i>16</i> Dysuria:	<i>16</i> Disuria
17 Emphysema:	17 Enfisema
18 Entropion:	18 Entropión
19 Epidermis:	19 Epidermis
20 Episcleritis:	20 Episcleritis
21 Epistaxis:	21 Epistaxis
22 Erythema:	22 Eritema
23 Erythroplakia:	23 Eritroplaquia

<i>24</i> Esotropia:	24 Esotropía
25 Gingivitis:	25 Gingivitis
26 Gonorrhea:	26 Gonorrea
27 Hemodialysis:	27 Hemodiálisis
28 Hemoptysis:	28 Hemoptisis
<i>29</i> Hepatocellular:	29 Hepatocelular
<i>30</i> Heterochromia:	<i>30</i> Heterocromia
<i>31</i> Hyperpyrexia:	<i>31</i> Hiperpirexia
<i>32</i> Hyperpnea:	<i>32</i> Hiperpnea
<i>33</i> Iritis:	33 Iritis
<i>34</i> Leukoplakia:	34 Leucoplaquia
35 Libido:	35 Libido
<i>36</i> Lymphadenopathy:	36 Linfadenopatía
37 Myasthenia:	37 Miastenia
38 Mydriasis:	38 Midriasis
<i>39</i> Myxedema:	39 Mixedema
40 Orthopnea:	40 Ortopnea
41 Osteoarthritis:	<i>41</i> Osteoartritis
42 Osteoporosis:	42 Osteoporosis
<i>43</i> Otosclerosis:	43 Otosclerosis
<i>44</i> Papilla:	44 Papila
45 Papilledema:	45 Papiledema
46 Paralysis:	46 Parálisis
47 Polyuria:	47 Poliuria
48 Pyelonephritis:	48 Pielonefritis
49 Pyrexia:	49 Pirexia
<i>50</i> Rhinorrhea:	50 Rinorrea
<i>51</i> Sarcoma:	<i>51</i> Sarcoma
52 Thorax:	52 Tórax
<i>53</i> Tinnitus:	53 Tinnitus
<i>54</i> Trauma:	54 Trauma
55 Uremia:	55 Uremia
<i>56</i> Urethra:	56 Uretra
57 Uvula:	57 Úvula
58 Vulvovaginitis:	58 Vulvovaginitis
<i>59</i> Xanthelasma:	59 Xantelasma
60 Xerostomia:	60 Xerostomía
61 Yersinia:	61 Yersinia

-Collocations:

Collocations are very common in English especially in technical texts and specifically in the medical field. Collocations are two words or more which are grammatically linked together as a result of their meaning. According to Ghazalla (1995:108), "*collocation is*

defined as a combination of two or more words that usually occur together consistently in different contexts in language."

The problem of translating collocations is that dictionaries do not often help in finding the meaning for them. But, in medical translation, it is not always difficult to find a collocation in the target language which has the same meaning as the source collocation. For instance, the English collocations:

- Bird flu
- Acute leukemia
- Nerve cell

They can be rendered into Spanish as:

- Gripe aviar
- Leucemia aguda
- Célula nerviosa

Baker (2011) believes that it is easy to assume that, as long as a collocation can be found in the target language which conveys the same or a similar meaning to that of the source collocation, the translator will not be confused by differences in the surface patterning between the two.

However, collocations are semantically motivated or transparent in nature. They sound convincing but are likely to distract a translator. Baker (2011) argues that translators sometimes get quite engrossed in the source text and may produce the oddest collocations in the target language for no justifiable reason.

Therefore, translators should avoid translating source language collocations literally when the collocational patterns are untypical of the target language.

The examples of collocations found in the medical textbook are:

ENGLISH

- 1.- Abdominal mass:
- 2.- Absent reflex:
- 3.- Actinic cheilitis:
- 4.- Acute diverticulitis:
- 5.- Adrenal insufficiency:
- **6.-** Adventitious sound:
- 7.- Air pressure:
- **8.-** Bacterial overgrowth:
- **9.-** Behavioral change:
- 10.- Benign tumor:
- 11.- Cardiovascular disease:
- *12.-* Carotid pulsation:
- 13.- Central visión:
- 14.- Cervical node:
- 15.- Chronic arthritis:
- 16.- Daily intake:
- 17.- Deep breathing:
- 18.- Esophageal stricture:
- *19.-* Excessive gas:
- *20.-* External ear:
- 21.- Facial skin:
- 22.- Family history:
- 23.- Fat depot:
- 24.- Fecal odor:
- 25.- Gradual onset:
- 26.- Hard exudate:
- **27.-** Hard stool:
- 28.- Head trauma:
- 29.- Health history:
- 30.- Infectious dysenteries:
- 31.- Inflammatory lesion:
- 32.- Inguinal hernia:
- 33.- Jugular vein:
- 34.- Kidney stone:
- 35.- Laryngeal nerve:
- *36.-* Lateral canthus:
- *37.-* Marginal gingivitis:
- 38.- Mechanical obstruction:
- 39.- Nasal septum:
- **40.-** Nasolacrimal duct:
- 41.- Nervous system:
- 42.- Neurogenic abnormalitie:
- *43.-* Neurologic symptom:

- 1.- Masa abdominal
- 2.- Reflejo ausente
- 3.- Queilitis actínica
- 4.- Diverticulitis aguda
- 5.- Insuficiencia suprarrenal
- 6.- Sonido adventicio
- 7.- Presión de aire
- 8.- Sobrecrecimiento bacteriano
- 9.- Cambio conductual
- *10.-* Tumor benigno
- 11.- Enfermedad cardiovascular
- 12.- Pulsación carotídea
- 13.- Visión central
- 14.- Ganglio cervical
- 15.- Artritis crónica
- 16.- Ingesta diaria
- 17.- Respiración profunda
- 18.- Restricción esofágica
- 19.- Gas excesivo
- 20.- Oído externo
- *21.-* Piel facial
- 22.- Historia familiar
- 23.- Depósito graso
- 24.- Olor fecal
- 25.- Inicio gradual
- 26.- Exudado duro
- 27.- Deposición dura
- 28.- Trauma cefálico
- 29.- Historial médico
- 30.- Disenterías infecciosas
- 31.- Lesión inflamatoria
- 32.- Hernia inguinal
- 33.- Vena yugular
- 34.- Cálculo renal
- 35.- Nervio laríngeo
- 36.- Canto lateral
- *37.-* Gingivitis marginal
- 38.- Obstrucción mecánica
- **39.-** Tabique nasal
- 40.- Conducto nasolagrimal
- 41.- Sistema nervioso
- 42.- Anomalía neurógena
- 43.- Síntoma neurológico

SPANISH

44 Obstructive lung disease:	<i>44</i> Enfermedad pulmonar obstructiva
45 Occlusive aortic disease:	45 Enfermedad aórtica oclusiva
<i>46</i> Ocular fundi:	46 Fondo ocular
47 Optic nerve:	47 Nervio óptico
48 Orthostatic hypotension:	48 Hipotensión ortostática
49 Pancreatic inflammation:	49 Inflamación pancreática
<i>50</i> Pelvic infection:	50 Infección pélvica
<i>51</i> Pericardial tamponade:	51 Taponamiento pericárdico
<i>52</i> Radial artery:	52 Arteria radial
53 Rectal vault:	53 Bóveda rectal
<i>54</i> Respiratory infection:	54 Infección respiratoria
55 Restrictive lung disease:	55 Enfermedad pulmonar restrictiva
56 Sinus tachycardia:	56 Taquicardia sinusal
<i>57</i> Thyroid isthmus:	57 Istmo tiroideo
58 Tympanic membrane:	58 Membrana timpánica
<i>59</i> Ulcerative colitis:	59 Colitis ulcerosa
60 Umbilical hernia:	60 Hernia umbilical
61 Underlying mass:	61 Masa subyacente
62 Unilateral exophthalmos:	62 Exoftalmos unilateral
<i>63</i> Ureteral colic:	63 Cólico uretral
64 Urinary incontinence:	64 Incontinencia urinaria
65 Vaginal discharge:	65 Secreción vaginal
66 Venous pressure:	66 Presión venosa
67 Ventricular rate:	67 Frecuencia ventricular
68 Visual acuity:	68 Agudeza visual
69 Vitreous body:	69 Cuerpo vítreo
70 Xiphoid process:	70 Apéndice xifoides
71 Zygomatic bone:	71 Hueso cigomático

-Compounds:

Compounds are terms that include more than one word or element to give a new meaning independent of the constituent components. Katamaba (1993: 219) defines a compound as "a word made up of at least two bases which can occur elsewhere as independent words".

Compounds are distinguished from other combinations, like phrases, collocations and idioms, in having an idiomatic meaning that, in some cases, cannot be derived from its components.

This can be illustrated by a medical term such as *chickenpox* where two words are concatenated, chicken and pox, to make a separate lexeme. *Chickenpox* is not related to chicken at all. On the other hand, some compounds consist of words or elements that can help to determine the whole meaning of the compound such as *photoelectric*, *photo-allergy*, *hospital-acquired infections*.

Each of the words or elements of the compound belongs to one of the syntactic classes: noun, preposition, verb, adverb, or adjective.

SPANISH

Examples found in the book:

ENGLISH

<i>1</i> Airway:	1 Vía respiratoria, vía aérea	
2 Backache:	2 Dolor de espalda	
3 Background:	3 Orígen, clase social	
4 Blackout:	4 Pérdida de conciencia	
5 Biofeedback:	5 Biorretroalimentación	
<i>6</i> Blackhead:	<i>6</i> Espinilla, punto negro	
7 Carbohydrate:	7 Carbohidrato	
8 Chickenpox:	8 Varicela	
9 Childhood:	9 Infancia	
<i>10</i> Cutpoint:	10 Valor	
11 Fingernail:	11 Uña del dedo de la mano	
12 Gallbladder:	12 Vesícula biliar	
13 Gallstone:	13 Cálculo biliar	
14 Gastrointestinal:	14 Gastrointestinal	
15 Headache:	15 Cefalea, dolor de cabeza	
<i>16</i> Heartburn:	<i>16</i> Pirosis	
17 Lymphedema:	17 Linfedema	
18 Malabsorption:	18 Malabsorción	
19 Hydronephrosis:	19 Hidronefrosis	
20 Hypothyroidism:	20 Hipotiroidismo	
<i>21</i> Musculoskeletal:	21 Musculosquelético, locomotor	
22 Outpatient:	22 Paciente externo	
23 Overweight:	23 Sobrepeso	
24 Pinprick:	24 Alfiler	
25 Psychopathology:	25 Psicopatología	
26 Pyelonephritis	26 Pielonefritis	

To sum up, during the translation from the source text into the target language we could use mainly the following procedures: the word for word, literal, transposition and modulation. These procedures were very helpful when the translation took place. They were reviewed again and again to make sure this was the best for each phrase, sentence and text to finally complete the book.

3.1.6.1.4. Resources

The resources are part of the material used in order to develop the activities and support the methods. It is important to describe all the equipments, instruments or tools and material (didactic material, desktop material, etc) we made used.

Now we describe all the resources employed in order to develop the activities:

-Medical textbook: Virtual book in PDF format "Bates' Guide to Physical Examination and History Taking ".

-Dictionaries:

Medicine dictionaries

Monolingual dictionaries in English and Spanish language

Bilingual dictionaries

Dictionaries of synonyms in English language

Dictionaries of synonyms in Spanish language

On line dictionaries

-Desktop material

-Personal computers

-Internet services

3.1.6.1.5. Timing

In this part of the project we described the specific moments (days, weeks and time) in which we developed every stage and activity of the action plan, and it is also necessary to mention the specific time (hour and minutes) in which we developed the activities or translation sessions programmed in advanced.

According to the rules of the Linguistics and Languages Department the development of the activities in relation to the time is based on function of 6 months, working full time for about 8 hours per day (no more than 1000 hours working in the development of the process of translation).

In respect to the number of pages, the amount of pages to be translated is at least 350 pages for each student. In this sense the students work full time in the development of the translation, presenting a bimonthly inform to the Tutor and the Principal of the Department of Medicine and the Representatives of the Department of Linguistics and Languages.

In this sense, each student translated 489 pages, involving chapters (pictures, diagrams and written texts) and other contents (Index, Errata, Activities, Questionnaires and Instructor's manual to accompany the Book). They worked 4 hours in the morning and 4 hours in the afternoon, translating 3 pages per day and during two weeks and at the end of these two weeks students proceeded to deliver the translations to the Tutor/ Assessor of the Supervised Project in the Department of Medicine. It is important to mention that we followed the original design of the book to make it easier to understand the whole content of the book. However, it was not possible to accomplish the intended work rate because the revision and editing of the translation process took longer than we expected.

Taking into account all we mentioned above, we proceed to describe all the specific moments for the development of the stages and activities of the action plan.

3.1.7. People in charge of development of the Supervised Project in the translation area

These are the persons in charge of the whole process of the development of the Supervised Project in the translation area:

Students: Wendy Sharon Flores Segalini and Claudia Chambi Ortiz (students in charge of developing and organizing the whole process of translation and the application of the techniques and instruments or tools).

Academic Tutor: Lic. Auza Santi Jacqueline

Tutor/ Assessor of the Supervised Project in the Medicine Department: Dr. Fernando Romero Alanez.

3.1.7.1. Action Plan

The following chart shows the work planning structure through the action plan:

information	of the first	-Literal	October 8,2012		
through	draft		(2 weeks)	Monolingual	Jacqueline Auzo
reading.			(2 ((cens))	dictionarias in	Sonti
		-Modified		English and	Santi.
				English and	
-Recognize				Ispanish	
the medicine		-Transposition		language	
technical	-Review of		-From Monday,		
terminology.	the		October 8, 2012	D'1' 1	
	translation of	- Adaptation	to Monday,	Bilingual	
	the first draft	*	October 22,	dictionaries	
-Translate the			2012 (2 weeks)		
first edition.		-Calque			
	-Edition of	1		Dictionaries of	
	the final		-From Monday,	synonyms in	
-Review the	translation.	-Modulation	October 22_{i}	English and	
translation.		1.10 001001011	Monday	Spanish	
			November 5	language	
		-Equivalence	2012 (2 weeks)		
-Edit the		Equivalence		0.11	
written				Online	
information			-From Monday,	dictionaries	
that has been			November 5 _,		
translated.			2012 to		
			Monday,	-Desktop	
			November 19,	Material	
-Elaborate a			2012 (2 weeks)		
glossary that					
incorporates			From Monday	-Personal	
all the			November 19	computers	
Medicine			2012 to		
technical			Monday,		
			December 3,	-Internet	

terms found in		2012 (2 weeks)	services.	
every stage of				
the translation				
process.		-From Monday,		
		December 3 _,		
		2012 to		
		Monday,		
		December 17,		
		2012 (2 weeks)		
		-From Monday,		
		December 17,		
		2012 to		
		Monday,		
		December 31,		
		2012 (2 weeks)		
		-From Monday,		
		December 31		
		2012 to		
		Sunday, January		
		13,2013		
		(2 weeks)		
		-From Sunday,		
		January 13, 2013		
		to Sunday,		
		January 27, 2013		
		(2 weeks)		
		()		

	-From Sunday,	
	January 27, 2013	
	to Sunday,	
	February 10,	
	2013 (2 weeks)	
	-From Sunday,	
	February 10,	
	2013 to	
	Sunday,	
	February 24,	
	2013 (2 weeks)	
	-From Sunday.	
	February 24	
	2013 to	
	Sunday March	
	10 2013	
	10,2013	
	(2 weeks)	
	-From Sunday,	
	March 10, 2013	
	to Sunday,	
	March 24 2013	
	,	
	(2 weeks)	

CHAPTER 4

4.1. DEVELOPMENT OF THE PROJECT PROPOSAL

For the development of the project proposal we took into account the stages and activities we developed during the process of translation through the project schedule.

4.1.1. Project schedule

The following chart illustrates the development of the project proposal in terms of stages, activities and time:

STAGES OF THE TRANSLATION PROCESS	ACTIVITIES	TIME
First stage	Translation of the written material in English into Spanish.	From September 10, 2012 to March 22, 2013.
Second stage	Review of the translation.	From March 1, 2013 to March 30, 2015.
Third stage	Edition of the translation.	From April 1, 2015 to July 31, 2015. From July 31, 2015 to August 31, 2015.

4.1.2. Sequence of activities

Sequence of activities describes the activities developed during the Supervised Project. In the following chart we explain and illustrate the sequence of activities.

4.1.2.1. Stage of the translation process

STAGE	TASK	MONTHS (2012-2013)
First Stage	Translations process	From September 2012 to March 2013
Second Stage	Revision of the whole translation (Chapter 1 "An Overview of Physical Examination and History Taking")	From March 1, 2013 to March 30, 2015.
Third Stage	Edition of the translation	From April 1, 2015 to July 31, 2015. From July 31, 2015 to August 31, 2015.

This stage shows three divisions: in which, the stage of the translation process has a description of each stage.

4.1.3. Achievements

During the first stages of the development of the Supervised Project in the translation field many activities have been developed, and the main ones are related to the process of translation and its different stages such as: translation of the first edition of the book, application of the translation techniques, review of the first edition of the translation, correction of the first edition of the translation and the development of a glossary that incorporates all the Medicine Technical Terms found in every stage of the translation process. Every stage has represented a very important part because they let us to develop the translation following some steps that have been planned in advance and then they have been implemented successfully. The changes that have been generated by the development of the activities are related to the fulfillment of every one of these steps and stages of the translation process, and the effects produced by the implementation of the work planning structure through the action plan helped to make a full description of each one of the steps and stages of the translation process.

On the other hand, since the very beginning the Principal of the Department of Medicine and his collaborators have supported to the members of the translation team in many ways, showing a lot of interest about the translation project and the benefits it represents for all the members of their Department. In this way, the implementation of the instruments and material of translation have produced good effects on the members of the Department of Medicine as well as on students in charge of developing the Supervised Project in the translation field.

4.1.4. Experiences

The development of the Supervised Project in the translation field has represented a great challenge, but at the same time it has been an important source of learning in order to acquire knowledge about Medicine field and Translation field, because we had the opportunity of put into practice our knowledge about translation field in order to contribute to the Department of Medicine in the translation of Medicine textbooks written in English language and put it into a language that can be understood by all the members of this Department and this makes us feel proud about our work.

During all the process of translation we went through different experiences, some of them were really nice, positive and exciting such us: the opportunity to read and translate a very interesting Medicine Textbook and learn a lot of things related to health problems, diagnoses and treatments as well as Medicine technical terms used and understood just by clinicians, this positive experience also let us to understand how clinicians work and how students of Medicine are trained to be future clinicians. It is also important to mention the
development of the process of translation that has been another positive experience because we could apply our linguistic and translation knowledge in order to translate the Medicine Textbook and this meant to work developing and planning a group of stages of translation that represented a great part of our work.

In addition to the positive experiences, there were also some challenging experiences which at the beginning we have overcame. In terms of time for example: we could not start the process of translation at the moment we expected but after some weeks we could get the material and start the process of translation.

On the other hand, all the translation process including the stages of translation such as: application of the translation techniques, review of the translation, correction and edition of the translation were positive experiences that let us to learn and practice more about translation of Medicine Textbooks, and we can honestly say that translation of Medicine Textbooks from English language into Spanish language can be possible if a careful process is followed, and we can also say that translation can be a powerful tool in order to overcome language barriers.

But apart from all these positive experiences we had to overcome several obstacles in respect to the revision and editing of the translation because it took longer than planned.

In this sense, we can say that the careful revision of the translation work took more than 6 months because it was necessary for both tutors at the Medicine and Linguistics Departments to revise the translation. Subsequently, we had to edit the drafts revised by the tutors, and we can admit that this took extra time, because we wanted to ensure the quality of the translation.

CHAPTER 5

5.1. CONCLUSIONS AND RECOMMENDATIONS

5.1.1. Conclusions

Through this Supervised Project we have sought to respond to the needs of the Department of Medicine, in partnership with the Department of Linguistics and Languages. The main needs of the Department of Medicine related to the lack of English language skills among students, which prevents them from learning from medical texts authored in the English-speaking world, where many important medical developments take place and are reported. One objective has therefore been to provide a high quality translation of the medical textbook, *Bate's Guide to Physical Examination and History Taking*, for use in the Department of Medicine, so that they have access to a part of this valuable information. A second objective was to create a glossary of terms taken from this book to support future projects in the Department of Linguistics and Languages similar to ours. We have arranged the glossary in alphabetical order to help the reader find words more easily.

We have achieved the first objective, and we believe our work will directly support the Department of Medicine to achieve its broader goals. We considered interpretations and methods of translation and what they meant for our work. We then carefully followed a set of steps to successfully translate the text, demonstrating in this report the ways we analyzed and translated the source language.

The impact of this project relates closely to the mission and vision of the Department of Medicine. The Department seeks to be a centre of excellence in the development of socially and culturally conscious doctors who are committed to a humanistic, ethical and scientific practice. It also seeks to raise its international profile.

The aim of the book *Bate's Guide to Physical Examination and History Taking* is to inculcate a sensitive and thorough manner of taking patient histories as a means to gain accurate medical information and build effective relationships that support good healthcare. We have made this book available to students of medicine, enabling them to reflect on and

improve their manner with patients, taking into account social and cultural differences. This book also reinforces the scientific, evidence-based approach to medicine. These contribute directly to the goal of the Department to lead in the area of ethical, humanistic and scientific practice. The availability of our translation of *Bate's* Guide may even encourage students to research new areas related to the social aspect of medical care, which is the focus of the book. This supports the commitment of the Department of Medicine to strengthening scientific research.

Another area in which we believe our translation could have a positive impact is in supporting the international outlook of the Department of Medicine. While having an English textbook translated into Spanish does not directly encourage students to improve their English, it will provide them with insights into the current state of the area of history taking and physical examination within the medical profession in the English-speaking world. This insight may encourage students both to learn English to discover more similar texts and to engage with the field of medicine from an international perspective. A practical consequence of encouraging students to engage with international developments in medicine now is that they may later develop research interests corresponding to international themes, which would situate the Department of Medicine better within an international context.

By achieving the second objective, to produce a glossary of medical terms, we believe our work will strengthen the capacity of the Department of Linguistics and Languages to collaborate with the Department of Medicine. Our glossary provides translations of common technical terms in their original context, so that the precise meaning of a word and its typical collocations are apparent. This will enable future students of linguistics who are working on medical translation projects to build on our experience and find the right translations in less time.

We benefitted greatly from the skills and knowledge about translation that we had developed through the length of our studies, but still found new challenges in completing this translation. We had to become familiar with new terminology in a different professional area, and handle significantly longer passages of text. What helped us the most was forming a set of procedures for the translation, editing and revision of the target text.

5.1.2. Recommendations:

After concluding this work we could recommend:

Translators consider important to read and be in touch with the area to work with. As we did for this work, it was very necessary to read medical book to know more about the technical terms.

Also for the Linguistics and Languages Department it is extremely important to enhance and promote the translation area since this is necessary to enhance students to get good knowledge of this area.

And for the Medicine Department, it is a great tool having a translated medical textbook from English to Spanish but they need to learn the language that is frequently used for scientific areas as English is.

This work was pioneering for the Medical translation but we certainly look for the authorities help to carry out projects like this to promote scientific knowledge in this area. There are many researches written in Spanish and carried out by Bolivian medicine students that in fact are highly needed to be translated and well known or published in other languages.

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NPENDIX

Glossary of Medical Terms

ENGLISH

A

- 1.- ABI (Ankle-brachial index):
- 2.- AC (Air conduction):
- 3.- Achilles:
- 4.- Achondroplastic dwarfism:
- 5.- Actinic cheilitis:
- 6.- Acuity:
- 7.-Adenomatous polyps:
- 8.- Adrenal insufficiency:
- 9.- ADLs (Activities of daily living):
- 10.- Adnexa:
- 11.- Adnexal tenderness:
- 12.- Adrenal insufficiency:
- 13.- Adrenergic pathway:
- 14.- Afferent pupillary defect:
- 15.- Age cohort:
- 16.- Aging:

17.- AIDS (Acquired immunodeficiency syndrome):

- 18.- Air contrast barium enema:
- 19.- Air seal:
- 20.- Airway:
- 21.- Ala nasi:
- 22.- Alae:
- 23.- Alertness:
- 24,- Alignment:
- 25.- Allen test:
- 26.- Alternating diarrea:

- 1.- IBT (Índice brazo tobillo)
- 2.- Conducción aérea, conducción de aire.
- 3.- Aquíleo (tendón de Aquiles)
- 4.- Enanismo acondroplásico.
- 5.- Queilitis actínica
- 6.- Agudeza
- 7.- Poliposis adenomatosa
- 8.- Insuficiencia suprarrenal
- 9.- AVDs (Actividades de la vida diaria)
- 10.- Anejos
- 11.- Hipersensibilidad del tejido,
- hipersensibilidad de los anejos
- 12.- Insuficiencia suprarrenal
- 13.- Vía adrenérgica
- 14.- Defecto aferente de la pupila
- 15.- Cohorte etaria
- 16.- Edad, envejecimiento, edad avanzada
- 17.- SIDA (síndrome de
- inmunodeficiencia adquirida)
- 18.- Enema de bario por contraste de aire
- 19.- Sello de aire
- 20.- Vía respiratoria, vía aérea
- 21.- Ala nasi
- 22.- Ala
- 23.- Estado de alerta
- 24.- Alineación
- 25.- Prueba de Allen
- 26.- Diarrea alterna

SPANISH

- 27.- Aminoglycoside:
- 28.- Ampulla of Vater:
- 29.- Amylase:
- 30.- Anal intercourse:
- 31.- Anal sphinter:
- 32.- Angina pectoris:
- 33.- Angle jerk:
- 34.- Angular cheilitis:
- 35.-Anorectal junction:
- 36.- Antecubital crease:
- 37.-Anterior naris:
- 38.- Anterior superior iliac spine:
- 39.- Anti-inflammatory drug:
- 40.- Antihelix:
- 41.- Antineoplastic agent:
- 42.- Antiplatelet agent:
- 43.- Aortic stenosis:
- 44.- Apex:
- 45.- Aphthous ulcer:
- 46.- Appetite suppressant:
- 47.- Arm cuff:
- 48.- Arousal:
- 49.- Arterial peripheral vascular disease:
- 50.- Arteriovenous (A-V) crossing :
- 51.- Arteriovenous crossing:
- 52.- Arcus senilis:
- 53.- Argyll Robertson pupil:
- 54.- Arteriolar-to-venous ratio (AV ratio):
- 55.- Arteriovenous fistula:
- 56.- Ascitic fluid:
- 57.- Assessment:
- 58.- Atelectasis:
- 59.- Atherosclerosis obliterans:
- 60.- Atherosclerosis peripheral vascular disease:
- 61.- Atraumatic (AT):

- 27.- Aminoglucósido
- 28.- Ampolla de Vater
- 29.- Amilasa
- 30.- Cópula, coito anal
- 31.- Esfínter anal
- 32.- Angina de pecho
- 33.- Reflejo aquíleo
- 34.- Queilitis angular
- 35.- Unión anorectal
- 36.- Pliegue antecubital, surco
- antecubital
- 37.- Ventanas nasales
- 38.- Espina ilíaca anterosuperior
- 39.- Fármaco anti-inflamatorio
- 40.- Antihélice
- 41.- Agente antineoplásico
- 42.- Agente antiplaquetario
- 43.- Estenosis aórtica
- 44.- Ápex, ápice
- 45.- Úlcera aftosa
- 46.- Supresor del apetito
- 47.- Manguito braquial (de brazo)
- 48.- Excitación sexual
- 49.- Enfermedad vascular periférica arterial
- 50.- Cruzamiento arteriovenoso (A-V)
- 51.- Cruzamiento arteriovenoso
- 52.- Arco senil
- 53.- Pupila de Argyll Robertson
- 54.- Arteriolar -a- concentración venosa (concentración AV)
- 55.- Fistula arteriovenosa
- 56.- Líquido ascítico
- 57.- Evaluación, valoración, examen,
- diagnóstico, examinación
- 58.- Atelectasia
- 59.- Aterosclerosis obliterante
- 60.- Enfermedad ateroesclerótica
- vascular periférica
- 61.- Atraumático

- 62.- Atropine-like agent:
- 63.- Ataxic breathing:
- 64.- Atrial:
- 65.- Atrial fibrillation:
- 66.- Atrial flutter:
- 67.- Atrial premature contraction:
- 68.- Auditory:
- 69.- Autoimmune disease:
- 70.- Autonomic innervation:
- 71.- Autonomic nerve supply:
- 72.- Autonomic nervous system:
- 73.- AV (atrioventricular) block:
- 74.- A–V crossing:
- 75.- A-V nicking:
- 76.- AV node:
- 77.- Axillae:
- 78.- Axillary node:
- 79.- Axis:

В

- 80.- Babinski reflex:
- 81.- Babbling:
- 82.- Band of muscle:
- 83.- Basal cell carcinoma:
- 84.- BC (Bone conduction):
- 85.- Beady nodule:
- 86.- Bedridden:
- 87.- Behavioral:
- 88.- Bell:
- 89.- Biceps:
- 90.- Bigeminal pulse:
- 91.- Bile:
- 92.- Binge:
- 93.- Biofeedback:
- 94.- Biot's breathing:

- 62.- Agente atrópico
- 63.- Respiración atáxica
- 64.- Auricular
- 65.- Fibrilación auricular
- 66.- Aleteo auricular, flúter auricular
- 67.- Contracción prematura auricular
- 68.- Auditivo
- 69.- Enfermedad autoinmunitaria
- 70.- Inervación autónoma
- 71.- Suministro del nervio autónomo
- 72.- Sistema nervioso autónomo
- 73.- Bloqueo AV (auriculoventricular)
- 74.- Cruzamiento A-V
- 75.- Huella A-V
- 76.- AV nodular (arteriovenoso o

auriculoventricular)

- 77.- Axilas
- 78.- Ganglio axilar
- 79.- Eje

- 80.- Reflejo de Babinski
- 81.- Balbuceo
- 82.- Músculo en banda
- 83.- Carcinoma basocelular
- 84.- Conducción ósea
- 85.- Nódulo en forma de cuentas
- 86.- Confinado en cama
- 87.- Conductual
- 88.- Diafragma, campana
- 89.- Bicipital (bíceps)
- 90.- Pulso bigémino
- 91.- Bilis, biliar
- 92.- Comer a atracones, atracón
- 93.- Biorretroalimentación
- 94.- Respiración de Biot

95.- Bisferiens pulse: 96.- Bitemporal hemianopsia: 97.- Blackhead: 98.- Blackout: 99.- Bladder: 100.- Bladder stone: 101.- Bleb: 102.- Bleching: 103.- Bleeding: 104.- Blind lymphatic capillary: 105.- Bloating: 106.- Blood: 107.- Blood pressure cuff: 108.- Bloodstream: 109.- Bloody: 110.- Blunt trauma: 111.- Bluntness: 112.- Blurred visión: 113.- BMI (Body Mass Index): 114.- Boil pointing: 115.- Bony: 116.- Bony ridge: 117.- Borborygmi: 118.- Booster: 119.- Bounding pulse: 120.- Bowel: 121.- BP (Blood preassure): 122.- Brainstem: 123.- Branch: 124.- Brachi: 125.- Brachial artery: 126.- Brachioradialis: 127.- Breath sound: 128.- Breathing: 129.- Breathing punctuated: 130.- Brisk: 131.- Bronchial breathing: bronguial

95.- Pulso bisferiens, pulso bífido 96.- Hemianopsia bitemporal 97.- Punto negro 98.- Pérdida de conciencia 99.- Vesícula, vesical 100.- Litiasis vesical, cálculo vesical 101.- Flictena, acumulación de líquido bajo la piel 102.- Eructar 103.- Hemorragia, sangrado, sangrante 104.- Capilar linfático ciego 105.- Hinchazón 106.- Sangre, sanguíneo, arterial 107.- Manguito de presión arterial 108.- Torrente sanguíneo 109.- Sanguinolento 110.- Embotamiento traumático 111.- Embotadura 112.- Visión borrosa, visión distorcionada 113.- IMC (Índice de Masa Corporal) 114.- Punto divieso 115.- Óseo 116.- Cresta ósea 117.- Borborigmo 118.- Invección de refuerzo 119.- Pulso saltón 120.- Intestino, intestinal 121.- PA (Presión arterial), TA (Tensión arterial) 122.- Tronco del encéfalo 123.- Rama, ramiificación 124.- Braquiorradial (supinador largo) 125.- Arteria humeral, arteria braguial 126.- Braquiorradial (supinador largo) 127.- Sonido respiratorio 128.- Respiración, respiratorio 129.- Respiración interrumpida

- 130.- Intenso
- 131.- Respiración

132.- Bronchiole:

133.- Bruise:

134.- Bruit:

135.- Buccal mucosa:

- 136.- Buerger's disease:
- 137.- Build:

138.- Bulbar palsy: 139.- Bulge: 140.- Bulk:

141.- Bullous miringitis:142.- Bulla:143.- BUN (Blood Urea Nitrogen):

144.- Bunion: 145.- Burrow:

C

146.- CAGE (Questions ((*c*utdown?), (*a*nnoyed by criticism?), (*g*uilt about drinking?), (*e*ye opener drinks?):

- 147.- Canal:
- 148.- Canaliculi:
- 149.- Canal of Schlemm:
- 150.- Canker sore:
- 151.- Capillary bed:
- 152.- Cardiomyopathy:
- 153.- Cardiovascular system:
- 154.- Cariogenic bacteria:
- 155.- Carpal tunnel síndrome:
- 156.- Carotid artery:
- 157.- Carotid bruit:

- 132.- Bronquiolo 133.- Magulladura, hematoma 134.- Ruido 135.- Mucosa bucal 136.- Enfermedad de Buerger 137.- Constitución, estructura física, estructura corporal, contextura 138.- Parálisis bulbar 139.- Protuberancia 140.- Masa, consistencia, bulto, voluminoso 141.- Miringitis ampollar 142.- Ampolla 143.- BUN (Nitrógeno Ureico Sanguíneo) 144.- Juanete
- 145.- Madriguera

146. - Cuestionario CAGE (¿desea "cortar" la dependencia?, ¿le molestan las críticas?, ¿se siente culpable por beber? y ¿necesita beber por la mañana?

- 147.- Conducto, canal
- 148.- Canalículo
- 149.- Conducto de Schlemm
- 150.- Afta dolorosa
- 151.- Lecho capilar
- 152.- Cardiomiopatía, miocardiopatía

153.- Sistema cardiovascular, aparato cardiovascular

- 154.- Bacteria cariogénica
- 155.- Síndrome del túnel carpiano
- 156.- Arteria carotídea
- 157.- Ruido carotídeo

- 158.- Carotid upstroke brisk:
- 159.- Caviar lesion:
- 160.- Cecum:
- 161.- Cellular debris:
- 162.- Central nervous system:
- 163.- Cerebellar:
- 164.- Cervical cord:
- 165.- Cervical lymph node:
- 166.- Cervical sympathetic chain:
- 167.- Chattering:
- 168.- Chest:
- 169.- Cheyne–Stokes breathing:
- 170.- Chewing surface:
- 171.- Chlamydial perihepatitis:
- 172.- Cholestatic jaundice:
- 173.- Cholinergic:
- 174.- Chondrodermatitis helicis:
- 175.- Choroidal:
- 176.- Chronic obstructive pulmonary disease:
- 177.- Clostridium perfringens:
- 178.- Clouded consciousness:
- 179.- Clouding:
- 180.- Clubbing:
- 181.- Cluster headache:
- 182.- Coat:
- 183.- Cochlea:
- 184.- Cochlear nerve:
- 185.- Coffee-ground emesis:
- 186.- Collagen vascular disease:
- 187.- Colloid oncotic pressure:
- 188.- Colonic diverticulum:
- 189.- Colorectal malignancy:
- 190.- Collagen vascular disease:
- 191.- Comedo:
- 192.- Common bile duct:

- 158.- Latido carotídeo intenso
- 159.- Lesión de caviar
- 160.- Ciego
- 161.- Detritos celulares
- 162.- Sistema nervioso central
- 163.- Cerebeloso
- 164.- Cordón cervical
- 165.- Ganglio linfático cervical
- 166.- Cadena simpática cervical
- 167.- Rechinamiento
- 168.- Pecho, tórax, torácico
- 169.- Respiración de Cheyne-Stokes
- 170.- Superficie de masticación
- 171.- Perihepatitis clamídica
- 172.- Ictericia colestática
- 173.- Colinérgico
- 174.- Condrodermatitis de hélice
- 175.- Coroideo
- 176.- Enfermedad pulmonar obstructiva crónica
- 177.- Clostridium perfringens
- 178.- Obnubilación mental
- 179.- Obnubilación, nebulosidad
- 180.- Dedos en palillo de tambor
- 181.- Cefalea en racimos
- 182.- Capa, cubierta
- 183.- Cóclea
- 184.- Nervio coclear
- 185.- Emesis en posos de café
- 186.- Enfermedad vascular del tejido conjuntivo, enfermedad vascular del
- colágeno
- 187.- Presión coloidoncótica
- 188.- Divertículo colónico
- 189.- Cáncer colorrectal maligno
- 190.- Enfermedad vascular del
- colágeno (enfermedad vascular del
- tejido conjuntivo)
- 191.- Comedón, punto negro
- 192.- Conducto colédoco

193 Complete heart block:	193 Bloqueo cardíaco completo
194 Conductive hearing loss:	194 Pérdida auditiva conductiva
195 Condyloma acuminatum:	195 Condiloma acuminado
196 Condylomata lata:	196 Condiloma plano
197 Congenital Horner's síndrome:	197 Síndrome congénito de Horner
198 Congestive heart failure:	198 Insuficiencia cardíaca congestiva
199 Cooing:	199 Arrullo
200 Copper wire artery:	200 Arteria en hilo de cobre
201 COPD (Chronic obstructive	201 EPOC (Enfermedad pulmonar
pulmonary disease):	obstructiva crónica)
202 Coping style:	202 Afrontamiento
203 Coronary artery disease:	203 Enfermedad de la arteria
	coronaria
204 Corpora cavernosa:	204 Cuerpos cavernosos
205 Corpus cavernosum:	205 Cuerpo cavernoso
206 Corpus spongiosum:	206 Cuerpo esponjoso
207 Corticotropin-releasing factor:	207 Factor liberador de corticotropina
208 Corynebacterium diphtheria:	208 Corynebacterium diphtheriae
209 Costovertebral angle tenderness	209 Hipersensibilidad en el ángulo
(CVAT):	costovertebral
210 Cotton-wool patch:	210 Parche algodonoso
211 Crackle:	211 Crepitante
212Cramp:	212 Calambre, espasmo
213 Cranial nerve:	213 Nervio cranial, par craneal
214 Crease:	214 Pliegue, surco
215 Crescent:	215 Semilunar
216 Crescentic shadow:	216 Sombra semilunar
217 Crevice:	217 Surco
218 Crohn's disease:	218 Enfermedad de Crohn
219 Cross section:	219 Sección transversal, corte
	transversal
220 Crush injury:	220 Lesión por aplastamiento
221 Crust:	221 Corteza, costra
222 Crusted cold sore:	222 Herpes labial con costra
223 Cryptorchidism:	223 Criptorquidia
224 Cuff:	224 Manguito, manguito de presión
225 Culture:	225Cultivo
226 Currant jelly stool:	226 Deposición de "coágulo en
	gelatina de grosella"
227 Cushing's syndrome:	227 Síndrome de Cushing

228.- Cutaneous cyst:229.- Cutaneous hyperesthesia:230.- CVAT (Costovertebral angle tenderness):231.- Cystic:

228.- Quiste cutáneo229.- Hiperestesia cutánea230.- Hipersensibilidad en el ángulocostovertebral231.- Quístico, cístico

D

232.- Damage:

- 233.- DBP:
- 234.- Debris:
- 235.- Deciduous tooth:
- 236.- Deep tendon reflex:
- 237.- Defective absorption:
- 238.- Demonstrable ulcer:
- 239.- Dependent edema:
- 240.-Depletion:
- 241.- Dermatome:
- 242.- DES (diethylstilbestrol):
- 243.- Detachment:
- 244.- Detrusor muscle:
- 245.- Diabetic gastroparesis:
- 246.- Diabetic ketoacidosis:
- 247.- Diaphragmatic dullness:
- 248.- Diastasis recti:
- 249.- Diastolic blood pressure (DBP):
- 250.- Diencephalon:
- 251.- Dietary recall:
- 252.- Diethylstilbestrol (DES):
- 253.- Diffuse esophageal spasm:
- 254.- Diffuse muscle wasting:
- 255.- Digital readout:
- 256.- Digital rectal examination (DRE):
- 257.- Dilantin therapy:
- 258.- Diopter:
- 259.- Dipstick:

- 232.- Daño
- 233.- Presión arterial diastólica
- 234.- Detritos, resto
- 235.- Diente decidual
- 236.- Reflejo tendinoso profundo
- 237.- Absorción defectuosa
- 238.- Úlcera efusiva
- 239.- Edema postural
- 240.-Adelgazamiento
- 241.- Dermátomo, dermatoma
- 242.- DES (dietilestilbestrol)
- 243.- Desprendimiento
- 244.- Músculo detrusor
- 245.- Gastroparesia diabética
- 246.- Cetoacidosis diabética
- 247.-Matidez diafragmática
- 248.- Diástasis del recto
- 249.- Presión arterial diastólica
- 250.- Diencéfalo
- 251.- Dieta
- 252.- Dietilestilbestrol (DES)
- 253.- Espasmo esofágico difuso
- 254.- Atrofia muscular difusa
- 255.- Lector digital, mirilla
- 256.- Examen del tacto rectal
- 257.- Terapia de reducción de los dientes
- 258.- Dioptría
- 259.- Tira reactiva

260.- Disc:

261.- Discharge:

262.- Disorder:

- 263.- Distress:
- 264.- Diurnal cortisol fluctuation:
- 265.- Dizziness:
- 266.- Divergent strabismus:
- 267.- Doppler technique:
- 268.- Doppler ultrasonography:
- 269.- Dorsalis pedis:
- 270.- Dorsalis pedís artery:
- 271.- Dot hemorrhage:
- 272.- Draw on:
- 273.- DRE (Digital rectal examination):
- 274.- Dribbling incontinence:
- 275.- Dripping:
- 276.- Drooling:
- 277.- Drooping:
- 278.- Drug-induced diarrhea:
- 279.- Druginduced cholestasis:
- 280.- Drug-induced respiratory depression:
- 281.- Drum:
- 282.- Drusen:
- 283.- Colloid body:
- 284.- Ductç:
- 285.- Dull:
- 286.- Dull facies:
- 287.- Dullness:

E

288.- Ear canal:

289.- Ear speculum: 290.- Echoing:

- 260.- Papila, disco
- 261.- Secreción, derrame
- 262.- Desorden, trastorno
- 263.- Dolor, sufrimiento, aflicción,
- angustia, pena, estrés
- 264.- Fluctuación diurna de cortisol
- 265.- Vértigo, mareo
- 266.- Estrabismo divergente
- 267.- Técnica Doppler
- 268.- Ecografía Doppler
- 269.- Pedí dorsal
- 270.- Arteria dorsal del pie
- 271.- Hemorragia de punto
- 272.- Sacar, Muestra
- 273.- Examen del tacto rectal
- 274.- Incontinencia por goteo
- 275.- Goteo
- 276.- Babear, baba, saliva
- 277.- Decaimiento
- 278.- Diarrea inducida por fármacos
- 279.- Colestasis inducida por fármacos
- 280.- Depresión respiratoria inducida por medicamentos
- . 281.- Tímpano
- 282.- Drusas
- 283.- Cuerpo coloide
- 284.- Conducto
- 285.- Débil, insulso, insípido, opaco
- 286.- Rostro de retardo mental
- 287.- Embotadura, matidez

288.- Conducto del oído, conducto auditivo, canal auditivo289.-Espéculo de oído290.- Eco, hacer eco

291.- ECG:

292.- ECG waves:

293.- Edge:

- 294.- Effusion:
- 295.- Electrocardiogram (ECG):
- 296.- Electrocardiographic test:
- 297.- Electrolyte imbalance:
- 298.- Enamel:
- 299.- Endemic goiter:
- 300.- Endorgan damage:
- 301.- Engorgement:
- 302.- Enlargement:
- 303.- Enteropathic E. coli:
- 304.- Epicanthal fold:
- 305.- Epidermoid cyst:
- 306.- Epididymis:
- 307.- Episcleral vessel:
- 308.- Episodic muscular ischemia:
- 309.- Epitrochlear node:
- 310.- Epstein-Barr virus:
- 311.- Erythroplakia:
- 312.- Esophageal stricture:
- 313.- Ethmoid sinus:
- 314.- Eustachian tube:
- 315.- Examination:
- 316.- Exophthalmometer:
- 317.- Expansile pulsation:
- 318.- Expenditure:
- 319.- Extralaryngeal lesion:
- 320.- Exudative tonsilitis:
- 321.- Eyeball:

- 291.- ECG (Electrocardiograma)
- 292.- Ondas ECG (Electromagnéticas)
- 293.- Borde, filo, margen, ángulo,
- esquina, límite
- 294.- Derrame
- 295.- Electrocardiograma (ECG)
- 296.- Electrocardiograma
- 297.- Desequilibrio electrolítico
- 298.- Esmalte
- 299.- Bocio endémico
- 300.- Daño orgánico
- 301.- Ingurgitación
- 302.- Dilatación
- 303.- E. coli enteropático
- 304.- Pliegue del epicanto
- 305.- Quiste epidermoide
- 306.- Epidídimo
- 307.- Vaso episclerítico
- 308.- Isquemia muscular episódica
- 309.- Ganglio epitroclear
- 310.- Virus de Epstein-Barr
- 311.- Eritroplaquia
- 312.- Restricción esofágica
- 313.- Seno etmoides
- 314.- Trompa de Eustaquio
- 315.- Exploración, examen, examinación
- 316.- Exoftalmómetro
- 317.- Pulsación expansible
- 318.- Consumo
- 319.- Lesión extralaringea
- 320.- Amigdalitis exudativa
- 321.- Globo ocular

322.- Failure:

- 323.- Familial bleeding disorder:
- 324.- Familial hearing loss:
- 325.- Farsightedness:
- 326.- Fat:
- 327.- Fat mass:
- 328.- Fatty stool:
- 329.- Fecal occult blood test (FOBT):
- 330.- Fecal-oral:
- 331.- Fecal shedding:
- 332.- Fidgety movement:
- 333.- Fine motor:
- 334.- Finger-to-nose (F \rightarrow N):
- 335.- Fingernail:
- 336.- Finger pad:
- 337.- Fingertip:
- 338.- Fist percussion:
- 339.- Fissured tongue:
- 340.- Fitness:
- 341.- Flake:
- 342.- Flaky:
- 343.- Flaky dermatitis:
- 344.- Flameshaped hemorrhages:
- 345.- Flame-shaped retinal

hemorrhage:

- 346.- Flashing light:
- 347.- Flat affect:
- 348.- Flexor surface:
- 349.- Flow:
- 350.- Flu vaccine:
- 351.- Fluctuating blurriness:
- 352.- Fluid-retaining state:
- 353.- Flushing:

354.- F →N:

- 322.- Insuficiencia, falla, problema, incapacidad
- 323.- Trastorno hemorrágico familiar
- 324.- Pérdida auditiva familiar
- 325.- Visión de lejos
- 326.- Grasa, gordo, adiposo
- 327.- Masa adiposa
- 328.- Heces grasas
- 329.- Prueba de sangre oculta en heces
- 330.- Oro-fecal
- 331.- Contaminación fecal
- 332.- Movimiento nervioso
- 333.- Motricidad fina
- 334.- Prueba dedo- nariz (D \rightarrow N)
- 335.- Uña del dedo
- 336.- Almohadilla del dedo
- 337.- Yema del dedo, punta del dedo
- 338.- Percusión con el puño
- 339.- Lengua fisurada
- 340.- Idoneidad física
- 341.- Escamas
- 342.- Escamoso
- 343.- Dermatitis descamativa
- 344.- Hemorragias en forma de llama
- 345.- Hemorragia en llama de la retina
- 346.- Luz parpadeante
- 347.- Afecto plano
- 348.- Superficie flexora
- 349.- Flujo
- 350.- Vacuna contra la gripe
- 351.- Distorsión fluctuante
- 352.- Trastorno de retención de
- líquidos, estado de retención de líquidos
- 252 Duborizo
- 353.- Ruborización
- 354.- D→N (Prueba dedo- nariz)

355.- FOBT (Fecal occult blood test):

356.- Fold:

- 357.- Folded recess:
- 358.- Follow-up:
- 359.- Fordyce granule:
- 360.- Fordyce spot:
- 361.- Foreskin:
- 362.- Fork:
- 363.- Foul:
- 364.- Follicle-stimulating hormone:
- 365.- Food debris:
- 366.- Food guide pyramid:
- 367.- Frame:
- 368.- Freckling:
- 369.- Friction rub:
- 370.- Frontal balding:
- 371.- Frontal headache:
- 372.- Frothy:
- 373.- Full skin contact:
- 374.- Fundi:
- 375.- Fundus:
- 376.- Funduscopic examination:
- 377.- Furosemide:

G

- 378.- Gag reflex:
- 379.- Gagging:
- 380.- Gait:
- 381.- Gallbladder:
- 382.- Gallstone:
- 383.- Gap:
- 384.- Gastric air bubble:
- 385.- Gastric outlet obstruction:

- 355.- Prueba de sangre oculta en heces
- 356.- Pliegue
- 357.- Fosita plegada
- 358.- Seguimiento
- 359.- Gránulo de fordyce
- 360.- Mancha de Fordyce
- 361.- Prepucio (capullo)
- 362.- Diapasón
- 363.- Fétido, sucio
- 364.- Hormona foliculoestimulante
- 365.- Detritos alimentarios
- 366.- Guía de la pirámide de alimentos
- 367.- Constitución
- 368.- Peca
- 369.- Rozadura por fricción
- 370.- Calvicie frontal
- 371.- Cefálea frontal
- 372.- Espumoso
- 373.- Contacto cutáneo completo
- 374.- Fondo del ojo
- 375.- Fondo del ojo
- 376.- Exploración funduscópica,
- exploración del fondo del ojo
- 377.- Furosemida

- 378.- Reflejo nauseoso
- 379.- Causar nauseas
- 380.- Marcha, forma de caminar
- 381.- Vesícula biliar
- 382.- Cálculo biliar
- 383.- Lapso
- 384.- Burbuja gástrica de aire
- 385.- Obstrucción del orificio de salida gástrico

386.- Gastrin in Zollinger–Ellison syndrome:

387.- Gastrocolic fistula:

- 388.- Gastroesophageal reflux:
- 389.- Gastrointestinal bleeding:
- 390.- Gastrointestinal tract:
- 391.- Gaze:
- 392.- Genetic endowment:
- 393.- Genetic makeup:
- 394.- Genitourinary:
- 395.- Geographic tongue:
- 396.- Giant cell arteritis:
- 397.- GI tract:
- 398.- Giddiness:
- 399.- Gilbert's syndrome:
- 400.- Gingiva:
- 401.- Gingival enlargement:
- 402.- Gingival hyperplasia:
- 403.- Gland:
- 404.- Glans:
- 405.- Glaucomatous cupping:
- 406.- Goiter:
- 407.- Gonococcal urethritis:
- 408.- Goosebumps:
- 409.- Gown:
- 410.- Grading system:
- 411.- Gram stain:
- 412.- Granulation tissue:
- 413.- Graves' disease:
- 414.- Grayish pseudomembrane:
- 415.- Great saphenous vein:
- 416.- Grid:
- 417.- Grief:
- 418.- Groin hernia:
- 419.- Groove:
- 420.- Gross hematuria:
- 421.- Gross motor:
- 422.- Growth spurt:
- 423.- Guaiac card:

- 386.- Gastrina en el síndrome de Zollinger-Ellison
- 387.- Fistula gastrocólica
- 388.- Reflujo gastroesofágico
- 389.- Hemorragia gastrointestinal
- 390.- Tracto gastrointestinal
- 391.- Mirada, vista
- 392.- Donación genética
- 393.- Composición genética
- 394.- Genitourinario
- 395.- Lengua geográfica
- 396.- Arteritis de células gigantes
- 397.- Tracto gastrointestinal
- 398.- Desvanecimiento, vértigo
- 399.- Síndrome de Gilbert
- 400.- Encía
- 401.- Hipertrofia gingival
- 402.- Hiperplasia gingival
- 403.- Glándula, ganglio
- 404.- Glande
- 405.- Taza glaucomatosa
- 406.- Bocio
- 407.- Uretritis gonocócica
- 408.- Piel de gallina
- 409.- Bata
- 410.- Sistema de graduación, sistema
- de clasificación
- 411.- Tinción de Gram
- 412.- Tejido de granulación
- 413.- Enfermedad de Graves
- 414.- Seudomembrana grisácea
- 415.- Vena safena mayor
- 416.- Rejilla
- 417.- Duelo, aflicción
- 418.- Hernia de la ingle
- 419.- Surco
- 420.- Hematuria general
- 421.- Motricidad gruesa
- 422.- Marcador del crecimiento
- 423.- Tarjeta de guayacol

424 Guarding:	424 Protección
425 Gum:	425 Encía
426 Gurgle:	426 Gorgoteo, borboteo, gorjeo
₽┤	
	427 Haamanbilua influanzaa da tina h
427 Haemophilus influenzae type b:	427 Haemophilus inituenzae de lipo b
428 Hair-bearing skin:	420 Fiel velluda 420 Loucoplasia poluda, Loucoplasia
429 Hairy leukoplakia:	velluda
420 Hoiny tongue:	430 - Lengua vellosa
430 Hairy longue.	431 - Aureola, balo
431 Hald.	432 - Audioscopio manual
432 Handodnoss:	433 - Preferencia manual
131 - Hansen's disease	434 Enfermedad de Hansen
435 - Hacking cough:	435 Tós seca
436 - Hard palate:	436 Paladar duro
437 - Harsh	437 Dureza, aspereza
438 - Hashimoto's thyroiditis	438 Tiroiditis de Hashimoto
439 - Hav fever	439 Fiebre del heno (rinitis alérgica)
440 - Head Eve Ear Nose and Throat	440 Cabeza, Ojos, Oído, Nariz y
(HEENT):	Garganta
441 Head injury:	441 Traumatismo craneal, lesión de la
	cabeza
442 Head trauma:	442 Trauma cefálico
443 HEENT (Head, Eye, Ear, Nose,	443 Cabeza, Ojos, Oídos, Nariz y
and Throat):	Garganta
444 Healed Chorioretinitis:	444 Coriorretinitis Cicatrizante
445 Healer:	445 Curador
446 Healing process:	446 Proceso de cicatrización,
	sanación, curación
447 Health care:	447 Atención médica
448 Health history:	448 Historial médico, historia sanitaria,
	historia médica
449 Hearing impairment:	449 Déficit auditivo
450 Hearing pathway:	450 Vía auditiva
451 Heart failure:	451 Insuficiencia cardíaca

452.- Heart rate (HR): 453.- Heart murmur: 454.- Heartburn: 455.- Heel-to-shin (H \rightarrow S): 456.- Helix: 457.- Hematochezia: 458.- Hemiparesis: 459.- Hemoccult negative: 460.- Hemolytic anemia: 461.- Hepatic friction rub: por fricción 462.- Hepatic tenderness: 463.- Hereditary hemorrhagic telangiectasia: 464.- Herniated fat: 465.- Hesitancy: 466.- High blood pressure: 467.- Hippus: 468.- Hirschsprung's disease: 469.- History taking: 470.- HIV disease: 471.- HIV infection: 472.- Hives: 473.- Hoarseness: 474.- Hollow abdominal organ: 475.- Homan's sign: 476.- Homonymous hemianopsia: 477.- Homonymous left superior quadrantic defect: 478.- Hoofbeat: 479.- Hooking technique: 480.- Horner's síndrome: 481.- Hospital setting: 482.- Hot flash: 483.- HR (Heart rate): 484.- H →S: 485.- Ht (Height):

452.- Frecuencia cardíaca (FC) 453.- Soplo cardíaco 454.- Pirosis 455.- Talón- espinilla (T→E) 456.- Hélice 457.-Hematoquecia 458.- Hemiparesia 459.- Prueba negativa de sangre oculta 460.- Anemia hemolítica 461.- Rozadura hepática 462.- Hipersensibilidad hepatica 463.- Telangiectasia hemorrágica hereditaria 464.- Hernia de grasa 465.- Dubitación 466.- Hipertensión arterial, presión arterial alta 467.- Contracción 468.- Enfermedad de Hirschsprung 469.- Historial clínico 470.- Infección por VIH, enfermedad del VIH (virus de la inmunodeficiencia humana) 471.- Infección por VIH (virus de la inmunodeficiencia humana) 472.- Roncha, urticaria 473.- Ronguera 474.- Órgano abdominal hueco 475.- Signo de Homan 476.- Hemianopsia homónima 477.- Defecto cuadrántico homónimo superior izquierdo 478.- Galope 479.- Técnica del sostenido 480.-Síndrome de Horner 481.- Ambiente hospitalario, hospital 482.- Bochorno con calentura 483.- FC (Frecuencia cardíaca) 484.- T \rightarrow E (Talón- espinilla) 485.- Talla

486.- Human immunodeficiency virus (HIV):

487.- Human papillomavirus:

488.- Husky:

489.- Hutchinson's teeth:

490.- Hyoid bone:

- 491.- hyphae:
- 492.- Hyperplastic:

493.- Hypertensive cardiovascular disease:

494.- Hypertensive retinopathy:

495.- Hypertrophic cardiomyopathy:

496.- Hyperventilation syndrome:

- 497.- Hypochloremic metabolic alkalosis:
- 498.- Hypoglycemia:
- 499.- Hypoglossal nerve:
- 500.- Hypopituitary dwarfism:

486.- Virus de la inmunodeficiencia

humana (VIH)

- 487.- Virus del papiloma humano
- 488.- Ronquera
- 489.- Dientes de Hutchinson
- 490.- Hueso hioides
- 491.- Hifa
- 492.- Hiperplásico
- 493.- Enfermedad cardiovascular hipertensiva
- 494.- Retinopatía hipertensiva
- 495.- Cardiomiopatía hipertrófica
- (miocardiopatía hipertrófica)
- 496.- Síndrome de hiperventilación
- 497.- Alcalosis metabólica

hipoclorémica

- 498.- Hipoglucemia, hipoglicemia
- 499.- Nervio hipogloso
- 500.- Enanismo hipopituitario

501.- IADLs:

- 502.- Ileum:
- 503.- Iliac crest:
- 504.- Iliac spine:
- 506.- Iliofemoral thrombosis:
- 507.- Imaginary fulcrum:
- 508.- Immune disorder:
- 509.- Immune serum globulin:
- 510.- Impairment:
- 511.- Incompetent gastroesophageal sphincter:
- 512.- Incus:
- 513.- Infarction:

- 501.- Actividades instrumentales de la vida diaria 502.- Íleon 503.- Cresta ilíaca 504.- Espina ilíaca 506.- Trombosis iliofemoral 507.- Fulcro imaginario 508.- Trastorno inmunológico, desorden inmunológico 509.- Inmunoglobulina sérica 510.- Alteración 511.-Esfínter gastroesofágico incompetente 512.- Yunque
- 513.- Infarto

- 514.- Infarcted nerve fiber:
- 515.- Infiltrative ophthalmopathy:
- 516.- Inflammatory bowel disease:
- 517.- Inflammatory tract:
- 518.- Infranuclear ophthalmoplegia:
- 519.- Infrared beam:
- 520.- Ingrained:
- 521.- Injection drug:
- 522.- Inner:
- 523.- Inpatient:
- 524.- Insight:
- 525.- Intercostal muscle retraction:
- 526.- Interdental papilla:
- 527.- Internal obturator muscle:
- 528.- Interstitial colloid oncotic pressure:
- 529.- Intestinal lactase deficiency:
- 530.- Intravascular colloid oncotic pressure:
- 531.- Introitus:
- 532.- Inward:
- 533.- lodine deficiency:
- 534.- Irritable bowel syndrome:
- 535.- Ischemic colitis:
- 536.- Ischemic stroke:
- 537.- Isolated systolic hypertension:
- 538.- Itching:
- 539.- Intercourse:

- 514.- Fibra nerviosa infartada
- 515.- Oftalmopatía infiltrativa
- 516.- Enfermedad inflamatoria intestinal
- 517.- Conducto inflamatorio
- 518.- Oftalmoplejía infranuclear
- 519.- Haz infrarrojo
- 520.- Arraigar
- 521.- Droga inyectable
- 522.- Interno
- 523.- Interno
- 524.-Introspección
- 525.- Retracción de la musculatura intercostal
- 526.- Papila interdentaria
- 527.- Músculo obturador interno
- 528.-Presión coloidoncótica intersticial
- 529.- Deficiencia de lactasa intestinal
- 530.- Presión coloidoncótica
- intravascular
- 531.- Introito
- 532.- Hacia adentro
- 533.- Deficiencia de yodo
- 534.- Síndrome del intestino irritable
- 535.- Colitis isquémica
- 536.- Ictus isquémico
- 537.- Hipertensión sistólica aislada
- 538.- Picazón, comezón, prurito
- 539.- Cópula, coito

J

- 540.- Jab: 541.- Jaundice:
- 542.- Jaw:
- 543.- Jejunum:
- 544.- Jeopardy:
- 545.- Joint:

- 540.- Pinchazo
- 541.- Ictericia
- 542.- Mandíbula, maxilar
- 543.- Yeyuno
- 544.- Peligro
- 545.- Articulación

546.- Jot Down: 547.- Jugular venous distention: 548.- Jugular venous pulse: 549.- Jugular venous pulsation:

550.- Jugular venous pressure: 551.- Junction:

546.- Anotar

547.- Distensión de la vena yugular

548.- Pulso venoso yugular

549.- Pulsación venosa yugular,

pulsación de la vena yugular

550.- Presión venosa yugular

551.- Zona de unión, juntura, unión, empalme

K

- 552.- Kaposi's sarcoma in AIDS:
- 553.- Kegel's excercise:
- 554.- Key blue—sensory:
- 555.- Key red—motor:
- 556.- Kidney stone:
- 557.- Knot Up:
- 558.- Knuckle:
- 559.- Koplik's spot:
- 560.- Korotkoff sound:
- 561.- Kussmaul breathing:
- 562.- Kyphosis:

- 563.- Labial frenulum:
- 564.- Labium:
- 565.- Labored breathing:
- 566.- Lactase deficiency:
- 567.- Lacrimal puncta:
- 568.- Lacrimal sac:
- 569.- Lactation:
- 570.- Lanky:
- 571.- Laryngeal nerve:
- 572.- Laxity:

- 552.- Sarcoma de Kaposi en el SIDA
- 553.- Ejercicios de Kegel
- 554.- Clavija azul -sensitiva
- 555.- Clavija roja-motora
- 556.- Cálculo renal
- 557.- Nudo superior
- 558.- Nudillo
- 559.- Mancha de Koplik
- 560.- Ruido de korotkoff
- 561.-Respiración de Kussmaul
- 562.- Cifosis

- 563.- Frenillo labial
- 564.- Labio
- 565.- Respiración dificultosa,

respiración trabajosa

- 566.- Deficiencia de lactasa
- 567.- Punta lacrimal, punta lagrimal
- 568.- Saco lagrimal, saco lacrimal
- 569.- Lactancia
- 570.- Desgarbado
- 571.- Nervio laríngeo
- 572.- Laxitud

573.- Lead line: 573.- Línea de plomo 574.- Lead poisoning: 574.- Intoxicación por plomo 575.- Leak: 575.- Fuga, goteo, dejar escapar 576.- Leakage: 576.- Goteo, fuga, filtración, pérdida 577.- Left-sided appendicitis: 577.- Apendicitis del lado izquierdo 578.- Leftsided heart failure: 578.- Insuficiencia cardíaca izquierda 579.- Left-sided pleuritic chest pain: 579.- Dolor pleurítico del tórax del lado izquierdo 580.- Left-sided S3: 580.- S₃ (tercer ruido del ciclo cardíaco de lado izquierdo) 581.- Left upper quadrant: 581.- Cuadrante superior izquierdo 582.- Left ventricular failure: 582.- Insuficiencia ventricular izquierda 583.- Left ventricular hypertrophy: 583.- Hipertrofia ventricular izquierda, Insuficiencia ventricular izquierda 584.- Lens: 584.- Lente, cristalino 585.- Lentigines: 585.- lentiginosas 586.- Lepromatous leprosy: 586.- Lepra lepromatosa 587.- Lethargy: 587.- Letargo 588.- Levator palpebrae muscle: 588.- Músculo elevador del párpado 589.- Leukoplakia: 589.- Leucoplaquia, leucoplasia 590.- Levater ani muscle: 590.-Músculo elevador del ano 591.- Level of consciousness: 591.- Nivel de conciencia (NC) 592.- Lid lag: 592.- Reposo del párpado, retraso del párpado 593.- Rayo de luz, haz de luz 593.- Light beam: 594.- Lightheadedness: 594.- Aturdimiento, mareo 595.- Limb: 595.- Miembro 596.- Limbus: 596.- Limbo 597.- Linear: 597.- Lineal 598.- Lingual frenulum: 598.- Frenillo lingual 599.- Lipid: 599.- Lípido, lipídico 600.- Lithotomy position: 600.- Posición de litotomía 601.- Liver failure: 601.- Insuficiencia hepática 602.- LLQ (Left Lower Quadrant): 602.- CII (Cuadrante Inferior Izquierdo) 603.- Lobe: 603.- Lóbulo 604.- Glándula submaxilar lobulada 604.- Lobulated submandibular gland: 605.- Lobule: 605.- Lóbulo 606.- Long-standing: 606.- Persistente 607.- Loose: 607.- Laxo, suelto, flojo 608.- LT (Left): 608.- Izquierdo

609.- Lump:

610.- Lung: 611.- Lung fluke: 612.- LUQ (Left upper quadrant):

613.- Luteinizing hormone:

- 614.- Lymph node:
- 615.- Lymphoid tissue:

M

- 616.- Macular star:
- 617.- Malabsorption syndrome:
- 618.- maladaptive nurturing:
- 619.- Malignancy:
- 620.- Malignant:
- 621.- Macular star:
- 622.- Malabsorption syndrome:
- 623.- Malignancy:
- 624.- Malignant:
- 625.- Malignant neoplasm:
- 626.- Malnutrition:
- 627.- Malleolar fold:
- 628.- Malleus:
- 629.- Mallory-Weiss tear:
- 630.- Maneuver:
- 631.- Manubrium:
- 632.- Mapping:
- 633.- Marcus Gunn pupil:
- 634.- Marfan's syndrome:
- 635.- Marked splenomegaly:
- 636.- Mass lesion:
- 637.- Masseter muscle:
- 638.- Mastoid bone:
- 639.- Mastoid process:

- 609.- Bulto
- 610.- Pulmón, pulmonar
- 611.- Duela pulmonar
- 612.- CSI (Cuadrante superior izquierdo)
- 613.- Hormona luteinizante
- 614.- Ganglio linfático
- 615.- Tejido linfoide

- 616.- Estrella macular
- 617.- Síndrome de malabsorción
- 618.- Desadaptativo de crianza
- 619.- Tumor maligno, neoplasia
- maligna, enfermedad maligna
- 620.- Maligno, tumor maligno
- 621.- Estrella macular
- 622.- Síndrome de malabsorción
- 623.- Tumor maligno, neoplasia
- maligna, enfermedad maligna
- 624.- Maligno, tumor maligno
- 625.- Neoplasia maligna
- 626.- Mala nutrición
- 627.- Pliegue maleolar
- 628.- Martillo
- 629.- Desgarro de Mallory-Weiss
- 630.- Maniobra
- 631.- Manubrio
- 632.- Cartografía
- 633.- Pupila de Marcus Gunn
- 634.- Síndrome de Marfan
- 635.- Esplenomegalia marcada
- 636.- Lesión en masa
- 637.- Músculo masetero
- 638.- Hueso mastoideo
- 639.- Apófisis mastoids

- 640.- Maxilla:
- 641.- Maxillary sinus:
- 642.- Measles:
- 643.- Mechanical narrowing:
- 644.- Medial:
- 645.- Medial canthus:
- 646.- Median sulcus:
- 647.- Medical:
- 648.- Medium-pitched midsystolic
- murmur:
- 649.- Medullary:
- 650.- Medullated nerve fibers:
- 651.- Meibomian gland:
- 652.- Menarche:
- 653.- Ménière's disease:
- 654.- Meniscus:
- 655.- Menopausal symptom:
- 656.- Mense:
- 657.- Mesenteric ischemia:
- 658.- Metabolic acidosis:
- 659.- Metastatic:
- 660.- Microbial growth:
- 661.- Microscopic urinalysis:
- 662.- Midaxillary line:
- 663.- Midbrain:
- 664.- Midclavicular line:
- 665.- Midforehead:
- 666.- Midline:
- 667.- Midsystolic murmur:
- 668.- Midsternal line:
- 669.- Migraine headache:
- 670.- Migratory thrombophlebitis:
- 671.- Mild arteriolar narrowing:
- 672.- Milestone:
- 673.- Miscarriage:
- 674.- Mixed hearing loss:
- 675.- Mole:
- 676.- Mons pubis:
- 677.- Moon face:
- 678.- Morbidity:

- 640.- Maxilar superior
- 641.- Seno maxilar
- 642.- Sarampión
- 643.- Estrechamiento mecánico
- 644.- Interno, medio, medial
- 645.- Canto interno, canto medio
- 646.- Surco medio
- 647.- Médico
- 648.- Soplo mesosistólico de tonalidad intermedia
- 649.- Medular
- 650.- Fibras nerviosas meduladas
- 651.- Glándula de meibomio
- 652.- Menarquia
- 653.- Enfermedad de Ménétrier
- 654.- Meniscos
- 655.- Síntoma menopáusico
- 656.- Menstruación
- 657.- Isquemia mesentérica
- 658.- Acidosis metabólica
- 659.- Metastásico
- 660.- Crecimiento microbiano
- 661.- Análisis microscópico de orina
- 662.- Línea axilar media
- 663.- Cerebro medio
- 664.- Línea clavicular media
- 665.- En medio de la frente
- 666.- Línea media
- 667.- Soplo mesosistólico
- 668.- Línea esternal media
- 669.- Cefalea migrañosa
- 670.- Tromboflebitis migratoria
- 671.- Estrechamiento arteriolar leve
- 672.- Etapa
- 673.- Aborto espontáneo
- 674.- Pérdida auditiva mixta
- 675.- Lunar
- 676.- Monte pubiano, monte de Venus
- 677.- Cara de luna llena
- 678.- Morbilidad

679.- Motor:680.- Motor loss:681.- Motor-sensory deficit:

- 682.- Mottling:
- 683.- Mucosal tear:
- 684.- Muffling point:
- 685.- Multinodular goiter:
- 686.- Multisystem disease:
- 687.- Mumps:
- 688.- Mumps orchitis:
- 689.- Murmur:
- 690.- Murphy's sign:
- 691.- Musculoskeletal:
- 692.- Musculoskeletal system:
- 693.- Myasthenia gravis:
- 694.- Mycobacterium leprae:
- 695.- Mydriatic drop:
- 696.- Myocardial infarction:
- 697.- Myopic:
- 698.- Mytonic dystrophy:

N

- 699.- Nail bed:
- 700.- Narrow-angle glaucoma:
- 701.- Narrowing:
- 702.- Nasal decongestant:
- 703.- Nasal septum:
- 704.- Nasal speculum:
- 705.- Nasal stuffiness:
- 706.- Nasopharyngeal:
- 707.- NC (Normocephalic):

708.- Near effort:

- 679.- Motoro
- 680.- Pérdida de movilidad
- 681.- Déficit sensitivo-motoro, déficit de
- sensibilidad motora, deficiencia

motorosensitiva

- 682.- Mancha
- 683.- Desgarro de la mucosa
- 684.- Punto de amortiguación
- 685.- Bocio multinodular
- 686.- Enfermedad multisistémica
- 687.- Paperas
- 688.- Orquitis urliana
- 689.- Soplo
- 690.- Signo de Murphy
- 691.- Musculosquelético, locomotor
- 692.- Sistema musculoesquelético,
- aparato locomotor
- 693.- Miastenia grave
- 694.- Mycobacterium leprae
- 695.- Gota midriática
- 696.- Infarto de miocardio
- 697.- Miope
- 698.- Distrofia miotónica

- 699.- Lecho ungueal, corion
- 700.- Glaucoma de ángulo estrecho
- 701.- Estrechamiento
- 702.- Descongestivo nasal
- 703.- Tabique nasal
- 704.- Espéculo nasal
- 705.- Taponamiento nasal
- 706.- Nasofaríngeo
- 707.- Normocefálico
- 708.- Esfuerzo de cerca de la vista

709.- Near reaction: 710.- Near visión: 711.- Nearsightedness: 712.- Neck supple: 713.- Necrotizing ulcerative gingivitis: 714.- Neoplastic: 715.- Nephrotic syndrome: 716.- Neurogenic: 717.- Neurosensory: 718.- Nevi: 719.- Night sweat: 720.- Nits: 721.- No costovertebral angle tenderness: 722.- Nocturia: 723.- Nod: 724.- Nodding: 725.- Node: 726.- Nongonococcal urethritis: 727.- Non-insulindependent diabetes: 728.- Nonparalytic strabismus: 729.- Nonpitting edema: 730.- Nonprescription drug: 731.- Nonproliferative retinopathy: 732.- Nonsteroidal anti-inflammatory drug: 733.- Nontyphoid Salmonella: 734.- Normocephalic (NC): 735.- Nosebleed: 736.- Nostril: 737.- Not true dysphagia: 738.- Notch: 739.- Notching: 740.- Nourished: 741.- NSAIDs: 742.- Nuclear cataract: 743.- Nuclei:

próxima 710.- Visión de cerca 711.- Visión de cerca, miopía 712.- Cuello flexible, cuello blando 713.- Gingivitis necrotizante ulcerativa 714.- Neoplásico 715.- Síndrome nefrótico 716.- Neurógeno 717.- Neurosensitivo 718.- Nevus 719.- Sudación nocturna, sudores nocturnos 720.- Liendres 721.- Sin hipersensibilidad en el ángulo costovertebral 722.- Nicturia 723.- Nudo 724.- Inclinación 725.- Ganglio, nódulo 726.- Uretritis no gonocócica 727.- Diabetes no insulinodependiente 728.- Estrabismo no paralítico 729.- Edema sin fóvea 730.- Medicamento adquirido sin receta, medicamento no prescrito 731.- Retinopatía no proliferativa 732.- Fármaco antiinflamatorio no esteroideo 733.- Salmonella no tifoidea 734.- Normocefálico 735.- Epístaxis, hemorragia nasal 736.- Ventana nasal 737.- Disfagia no verdadera 738.- Escotadura 739.- Surco 740.- Nutrido 741.- AINEs 742.- Catarata nuclear

709.- Reacción de cerca, reacción

743.- Núcleo

744 Numbness:	744 Entumecimiento	
745 Nystagmus:	745 Nistagmo	
lacksquare		
746 Oblique lighting:	746 Luz oblicua, luz indirecta	
747 Oblique muscle:	747 Músculo oblicuo	
748 Obstetric history:	748 Historia obstétrica	
749 Obstructing lesion:	749 Lesión obstructiva	
750 Obstructive lung disease:	750 Enfermedad pulmonar obstructiva	
751 Obstructive pulmonary disease:	751 Enfermedad pulmonar obstructiva	
752 Obturator sign:	752 Signo del obturador	
753 Occasional stress incontinenece:	753 Incontinencia ocasional de	
	esfuerzo	
754 Occipital lymph node:	754 Ganglio linfático occipital	
755 Occlusive aortic disease:	755 Enfermedad aórtica oclusiva	
756 Occult blood:	756 Prueba de sangre oculta	
757 Ocular fundi:	757 Fondo ocular	
758 Oculomotor nerve:	758 Nervio motor ocular común	
759 Oculomotor nerve paralysis:	759 Parálisis del nervio motor ocular común	
760 Office:	760 Consultorio	
761 Omentum:	761 Omenta, omentums epiplón	
762 Omohyoid muscle:	762 Músculo omohioideo	
763 Onset:	763 Inicio	
764 Oozing ulcer:	764 Úlcera exudativa, úlcera	
	rezumosa	
765 Open-angle glaucoma:	765 Glaucoma de ángulo-abierto	
766 Opening:	766 Apertura	
767 Ophthalmoscopic:	767 Oftalmoscópico, oftalmológico	
768 Opiate:	768 Opiáceo	
769 Optic chiasm:	769 Quiasma óptico	
770 Optic disc:	770 Papila óptica	
771 Optic nerve disease:	771 Enfermedad del nervio óptico	
772 Optic tract:	772 Vía óptica	
773 Oral cáncer:	773 Cáncer de boca	

774.- Oral floor:

775.- Oral mucosa:

- 776.- Oral-penile transmission:
- 777.- Oral petechiae:
- 778.- Oritching:
- 779.- Orthostatic hypotension:
- 780.- Osmotic purgative:
- 781.- Otitic barotrauma:
- 782.- Otolaryngologist:
- 783.- Outlet obstruction:
- 784.- Outline:
- 785.- Outpatient:
- 786.- Ovarian tumor:
- 787.- Over-the counter drug:
- 788.- Overclosure:
- 789.- Overeating:
- 790.- Overflow incontinence:
- 791.- Overlying tissue:
- 792.- Overlying mucosa:
- 793.- Overweight:

D

- 794.- Pad:
 795.- Pallor:
 796.- Palpebral fissure:
 797.- Palsy:
 798.- Panhypopituitarism:
 799.- Pap smear:
 800.- Papanicolaou smear:
- 801.- Papillae:

- 774.- Suelo oral, suelo bucal, suelo de la boca
- 775.- Mucosa bucal
- 776.- Transmisión oropeneana
- 777.- Petequia oral
- 778.- Picazón
- 779.- Hipotensión ortostática
- 780.- Purgante osmótico
- 781.- Barotrauma ótico
- 782.- Otorrinolaringólogo
- 783.- Obstrucción del orificio de salida
- 784.- Contorno, delinear, remarcar,
- esquema
- 785.- Paciente externo
- 786.- Tumor ovárico
- 787.- Medicamento sin receta,
- medicamento a la venta sin

prescripción

- 788.- Sobrecierre
- 789.- Comer en exceso
- 790.- Incontinencia por rebosamiento
- 791.- Tejido suprayacente
- 792.- Mucosa recubierta
- 793.- Sobrepeso

- 794.- Yema del dedo, almohadilla
- 795.- Palidez
- 796.- Hendidura palpebral
- 797.- Parlesía, parálisis
- 798.- Panhipopituitarismo
- 799.- Ología vaginal, frotis de
- Papanicolau, citología vaginal
- 800.- Citología vaginal (Papanicolaou)
- 801.- Papilas

802.- Papillary dilation: 802.- Dilatación papilar 803.- Papillary granulation tissue: 803.- Tejido de granulación papilar 804.- Paradoxical pulse: 804.- Pulso paradójico 805.- Paralytic strabismus: 805.- Estrabismo paralítico 806.- Parasympathetic nervous system: 806.- Sistema nervioso parasimpático 807.- Peripheral vascular disease: 807.- Trastorno vascular periférico 808.- Parkinson's disease: 808.- Enfermedad de Parkinson 809.- Paroxysmal nocturnal dyspnea: 809.- Disnea paroxística nocturna 810.- Pars fláccida: 810.- Pars fláccida o la parte flácida 811.- Pars tensa: 811.- Parte tensa 812.- Past history: 812.- Historia anterior 813.- Patch: 813.- Parche 814.- Patella: 814.- Rótula 815.- Patellar: 815.- Rotuliano 816.- Patent ductus arteriosus (PDA): 816.- Conducto arterioso permeable (CAP) 817.- Fisiopatología, fisiopatológico 817.- Pathophysiology: 818.- Pathway: 818.- Vía 819.- PDA (Patent ductus arteriosus): 819.- CAP (Conducto arterioso permeable) 820.- Peak: 820.- Pico, punto máximo 821.- Pectinate line: 821.- Línea pectínea 822.- Pelvic floor: 822.- Suelo de la pelvis, suelo pélvico 823.- Penile: 823.- Peneano 824.- Lámpara de haz eléctrico 824.- Penlight: filiforme, lápiz especial fotosensible 825.- Pericardial tamponade: 825.- Taponamiento pericárdico 826.- Periorbital puffiness: 826.- Inflamación periorbitaria 827.- Peripheral neuropathy: 827.- Neuropatía periférica 828.- Peripheral vascular system: 828.- Aparato vascular periférico, sistema vascular periférico 829.- Periurethral: 829.- Periuretral 830.- Pertussis: 830.- Tosferina 831.- Petechiae: 831.- Peteguias 832.- Peutz-Jeghers síndrome: 832.- Síndrome de Peutz-Jeghers 833.- Phalanx: 833.- Falange 834.- Pharyngeal: 834.- Faríngeo 835.- Pharynx erythematous: 835.- Faringe eritematosa 836.- Phlegm: 836.- Flema 837.- Physiologic cupping: 837.- Taza fisiológica

- 838.- Physiologic spliting:
- 839.- Pigmented crescents:
- 840.- Pilar cyst:
- 841.- Pilar cyst:
- 842.- Pimple:
- 843.- Pinprick:
- 844.- Pinworm:
- 845.- Pitch:
- 846.- Pitting edema:
- 847.- Planing:
- 848.- Plaque:
- 849.- Platelet:
- 850.- Pleuritic chest pain:
- 851.- Pneumococcal vaccines:
- 852.- Point-to-point movement:
- 853.- Polymyalgia rheumatica:
- 854.- Pons:
- 855.- Popliteal:
- 856.- Postconcussion syndrome:
- 857.- Post-ictal state:
- 858.- Postmenopausal bleeding:
- 859.- Postural dizziness:
- 860.- Pregnancy tumor:
- 861.- Preretinal hemorrhage:
- 862.- Presbycusis:
- 863.- Present illness:
- 864.- Primary syphilis:
- 865.- Probe:
- 866.- Prodromal symptom:
- 867.- Proliferative diabetic retinopathy:
- 868.- Proliferative retinopathy:
- 869.- Pronator drift:
- 870.- Prone:
- 871.- Prostate-specific antigen test:
- 872.- Protruding:
- 873.- Pruritus ani:
- 874.- PSA (Prostate-specific antigen test):
- 875.- Psoas muscle:

- 838.- Desdoblamiento fisiológico
- 839.- Semilunares pigmentados
- 840.- Quiste piloso
- 841.- Quiste piloso
- 842.- Grano en la piel
- 843.- Sensibilidad a la prueba del alfiler
- 844.- Oxiuro
- 845.- Tono de la voz, tonalidad
- 846.- Edema con fóvea
- 847.- Pulido
- 848.- Placa
- 849.- Plaqueta
- 850.- Dolor pleurítico del tórax
- 851.- Vacunas contra el neumococo
- 852.- Movimiento de punta a punta
- 853.- Polimialgia reumática
- 854.- Protuberancia, puente de Varolio
- 855.- Poplíteo
- 856.- Síndrome de posconmoción
- 857.- Estado post-ictal
- 858.- Sangrado posmenopáusico
- 859.- Vértigo postural, tambaleo
- 860.- Tumor de embarazo
- 861.- Hemorragia preretinal
- 862.- Presbiacusia
- 863.- Enfermedad actual
- 864.- Sífilis primaria
- 865.- Sonda
- 866.- Síntoma prodrómico
- 867.- Retinopatía diabética proliferativa
- 868.- Retinopatía proliferativa
- 869.- Deriva pronadora
- 870.- Decúbito prono
- 871.- Análisis del antígeno específico
- de la próstata
- 872.- Sobresalir, sobresaliente
- 873.- Prurito anal
- 874.- Análisis del antígeno específico
- de la próstata
- 875.- Músculo de psoas
876.- Psychogenic:

- 877.- Psychomotor slowing:
- 878.- Psychopathology:
- 879.- Pterygium:
- 880.- Pudendal nerve:
- 881.- Puffy facies:
- 882.- Pulmonary infarction:
- 883.- Pulsus alternans:
- 884.- Puncta:
- 885.- Punctate exudate:
- 886.- Punctum:
- 887.- Pupillary:
- 888.- Pure aortic regurgitation:
- 889.- Purging:

- 876.- Psicógeno
- 877.- Retraso psicomotor
- 878.- Psicopatología, psicopatológico
- 879.- Pterigión
- 880.- Nervio pudendo
- 881.- Rostro redondeado
- 882.- Infarto pulmonar
- 883.- Pulso alternante
- 884.- Punta
- 885.- Exudado punteado
- 886.- Punto
- 887.- Pupilar, pupila
- 888.- Insuficiencia aórtica pura
- 889.- Purgativo, purgación, purgarse

Q

890.- Quadrantic defect:891.- Quadrant:892.- Quiescent:

R

893.- RAMs (Rapid alternating movements):

- 894.- Range of motion:
- 895.- Rash:
- 896.- Rate:
- 897.- Raynaud's phenomenon:
- 898.- RCM (Right costal margin):
- 899.- RDA (recommended daily

allowance):

900.- Reassurance:

901.- Rectal vault:

- 893.- Movimientos alternantes rápidos
- 894.- Arco de movilidad
- 895.- Erupción
- 896.- Frecuencia
- 897.- Fenómeno de Raynaud
- 898.- Margen costal derecho
- 899.- ADR (aportes dietéticos
- recomendados)
- 900.- Tranquilizar, tranquilización,

reconfortación

901.- Bóveda rectal

890.- Defecto cuandrántico 891.- Cuadrante 892.- Quiescente

- 902.- Rectosigmoid cáncer:
- 903.- Rectouterine pouch:
- 904.- Rectovaginal examination:
- 905.- Redness:
- 906.- Red blood cell:
- 907.- Reflex hammer:
- 908.- Refractive error:
- 909.- Reliability:
- 910.- Remainder:
- 911.- Renal failure:
- 912.- Restlessness:
- 913.- Restrictive lung disease:
- 914.- Retro-orbital:
- 915.- Retrogade filling:
- 916.- Retroverted uterus:
- 917.- Rhythm:
- 918.- Right costal margin (RCM):
- 919.- Right monocular esotropia:
- 920.- Right tympanic membrane (TM):
- 921.- Rim:
- 922.- Rinne test:
- 923.- Romberg test:
- 924.- Rotary vértigo:
- 925.- Roof:
- 926.- Root:
- 927.- Route:
- 928.- RR (Respiratory rate):
- 929.- RT (Right):
- 930.- Runny nose:
- 931.- Rushing:

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932.- Sacrococcygeal:

- 933.- Sacroiliitis:
- 934.- Salivary gland:

- 902.- Cáncer rectosigmoideo
- 903.- Bolsa rectouterina
- 904.- Exploración de tacto rectovaginal
- 905.- Enrojecimiento
- 906.- Eritrocitos, hematíes
- 907.- Martillo de reflejos
- 908.- Error de refracción
- 909.- Veracidad, fiabilidad
- 910.- Resto, residuo
- 911.- Insuficiencia renal
- 912.- Intranquilidad
- 913.- Enfermedad pulmonar restrictiva
- 914.- Retro-orbitario
- 915.- Llenado retrógrado
- 916.- Útero en retroversión
- 917.- Ritmo
- 918.- Margen costal derecho
- 919.- Esotropía monocular derecha
- 920.- Membrana timpánica derecha
- 921.- Borde
- 922.- Prueba de Rinne
- 923.- Prueba de Romberg
- 924.- Vértigo rotatorio
- 925.- Techo, paladar
- 926.- Raíz
- 927.- Vía de administración
- 928.- FR (Frecuencia respiratoria)
- 929.- Derecho
- 930.- Nariz agripada
- 931.- Sonido persistente

- 932.- Sacrococcígea
- 933.- Sacroileítis
- 934.- Glándula salival

935.- Salivary salt: 935.- Sódico salival 936.- Saphenous vein: 936.- Vena safena 937.- SBP (Systolic blood pressure): 937.- Presión arterial sistólica 938.- Scabies: 938.- Sarna 939.- Scale: 939.- Escama 940.- Scaliness: 940.- Escamación 941.- Scaling: 941.- Escamación, quitar el sarro de los dientes 942.- Escamoso 942.- Scaly: 943.- Scarlet fever: 943.- Escarlatina 944.- Scar: 944.- Cicatriz 945.- Scarring: 945.- Cicatrización 946.- Scattered cherry angioma: 946.- Angioma cereza disperso 947.- Scintillating scotomas: 947.- Escotoma escintilante 948.- Sclera: 948.- Esclerótica 949.- Scleral surface: 949.- Superficie de la esclerótica 950.- Scope: 950.- Alcance 951.- Scratchy: 951.- Aspereza 952.- Screening test: 952.- Examen de control, examen exploratorio 953.- Scrotal tongue: 953.- Lengua escrotal 954.- Sebaceous cyst: 954.- Quiste sebáceo 955.- Second-degree AV block: 955.- Bloqueo AV (auriculoventricular) de segundo grado, bloqueo AV de segundo grado 956.- Seizure: 956.- Convulsión, convulsivo 957.- Selected facies: 957.- Facies seleccionadas, caras seleccionadas 958.- Self-induced purging: 958.- Purgación autoinducida 959.- Vómito autoinducido 959.- Self-induced vomiting: 960.- Senile ptosis: 960.- Ptosis senil 961.- Sensitive: 961.- Sensible, delicado, conciso, sensitivo 962.- Pérdida auditiva neurosensorial 962.- Sensorineural hearing loss: 963.- Sensory: 963.- Sensitivo 964.- Pérdida de sensibilidad 964.- Sensory loss: 965.- Sentinel tag: 965.- Apéndice centinela 966.- Septal perforation: 966.- Perforación del tabique 967.- Septum: 967.- Tabique 968.- Serous effusion: 968.- Derrame seroso

969.- Serum amylase: 970.- Sessile: 971.- Severe: 972.- Sexually transmitted disease: 973.- Shaft: 974.- Shaking chill: 975.- Shallow: 976.- Shallow gingival sulcus: 977.- Shearing force: 978.- Shelf: 979.- Shifting: 980.- Shivering: 981.- Short process: 982.- Shortness of breath: 983.- S1: 984.- S2. 985.- S₃: 986.- S₄: 987.- Sick headache: 988.- Side effect: 989.- Side-lying position: 990.- Sideburn area: 991.- Sighing respiration: 992.- Sigmoid colon: 993.- Significant hypotension: 994.- Silver wire artery: 995.- Single nodule: 996.- Sinus: 997.- Sinus tachycardia: 998.- Sinus tract: 999.- Sinus tenderness: 1.000.- Skin rash: 1.001.- Slitlike beam:

969.- Amilasa sérica 970.- Sésiles 971.- Grave, severo, doloroso 972.- Enfermedad de transmisión sexual 973.- Tallo 974.- Escalofrío tiritante 975.- Superficial 976.- Surco superficial gingival 977.- Fuerza de cizalla 978.- Escalón 979.- Desplazamiento 980.- Temblor 981.- Pequeña apófisis 982.- Falta de aliento, deficiencia respiratoria, falta de aire 983.- S_{1.} primer ruido del ciclo cardíaco 984.- S₂, segundo ruido del ciclo cardíaco 985.- S₃ tercer ruido del ciclo cardíaco 986.- S₄ cuarto ruido del ciclo cardíaco 987.- Cefalea patológica 988.- Efecto secundario, efecto colateral 989.- Posición de decúbito lateral 990.- Área de platilla 991.- Respiración con suspiros 992.- Colon sigmoide 993.- Hipotensión significativa 994.- Arteria en hilo de plata 995.- Nódulo unitario 996.- Seno nasal, sinusal 997.- Taquicardia sinusal 998.- Trayecto fistuloso 999.- Hipersensibilidad en el seno, dolor en el seno nasal 1.000.- Erupción cutánea

1.001.- Ranura del rayo, ranura del haz, hendidura del haz, hendidura del rayo.

1.002 Slit-lamp examination:	1.002 Examen de lámpara de
	hendidura
1.003 Small saphenous vein:	1.003 Vena safena menor
1.004 Smooth tongue:	1.004 Lengua lisa
1.005 Snellen chart:	1.005 Optotipo de Snellen
1.006 Snellen eye chart:	1.006 Optotipo para ojo de Snellen
1.007 Socket:	1.007 Casquillo
1.008 Sodium chloride:	1.008 Cloruro sódico
1.009 Somatic nerve supply:	1.009 Inervación somática
1.010 Somatic sensory nerve:	1.010 Nervio sensitivo somático
1.011 Somatization disorder:	1.011 Trastorno de somatización
1.012 Sore:	1.012 Herida, llaga, úlcera
1.013 Soreness:	1.013 Dolor
1.014 Sore throat:	1.014 Dolor de garganta, faringitis
1.015 Sore tongue:	1.015 Úlcera en la lengua, lengua
	ulcerada
1.016 Sound:	1.016 Sonido, ruido
1.017 Span:	1.017 Extensión
1.018 Sparse:	1.018 Escaso
1.019 Speck:	1.019 Lunar, ancha, mota
1.020 Specula:	1.020 Espéculos
1.021 Speculum:	1.021 Espéculo
1.022 Spermatic cord:	1.022 Cordón espermático
1.023 Spermatocele:	1.023 Espermatocele
1.024 Spermatozoa:	1.024 Espermatozoides
1.025 Sphenoid sinus:	1.025 Seno esfenoidal
1.026 Sphygmomanometer:	1.026 Esfigmomanómetro
1.027 Sphygmomanometry:	1.027 Esfigmomanometría
1.028 Spinal stenosis:	1.028 Estenosis medular
1.029 Spine:	1.029 Espina dorsal, columna
	vertebral
1.030 Spleen:	1.030 Bazo
1.031 Splenic:	1.031 Bazo
1.032 Sporadic goiter:	1.032 Bocio esporádico
1.033 Spot:	1.033 Punto, mancha, lunar, borrón
1.034 Sputum:	1.034 Esputo
1.035 Squamous cell carcinoma:	1.035 Carcinoma de células
	escamosas
1.036 Squint:	1.036 Bizqueo
1.037 Stadiometer:	1.037 Tallimetro

1.038.- Stapes: 1.038.- Estribo 1.039.- Stare: 1.039.- Mirada fija 1.040.- Starvation: 1.040.- Hambre, ayuno 1.041.- Starving: 1.041.- Ayuno 1.042.- Stasis dermatitis: 1.042.- Dermatitis por estasis 1.043.- Stasis ulcer: 1.043.- Úlcera de estasis 1.044.- State of awareness: 1.044.- Estado de vigilia 1.045.- STDs (Sexually transmitted 1.045.- ETS (Enfermedades de diseases): transmisión sexual) 1.046.- Stensen's duct: 1.046.- Conducto de Stensen 1.047.- Sternal: 1.047.- Esternal 1.048.- Sternocleidomastoid muscle: 1.048.- Músculo esternocleidomastoideo 1.049.- Stereognosis: 1.049.- Estereognosis 1.050.- Stiff neck: 1.050.- Tortícolis 1.051.- Stiffness: 1.051.- Rigidez 1.052.- Regordete 1.052.- Stocky: 1.053.- Stool: 1.053.- Deposición 1.054.- Stool for occult blood: 1.054.- Prueba de sangre oculta en heces 1.055.- Encorvarse 1.055.- Stooping: 1.056.- Esfuerzo, tensión 1.056.- Straining: 1.057.- Hebra 1.057.- Strand: 1.058.- Tira de músculo 1.058.- Straplike muscle: 1.059.- Faringitis estreptocócica 1.059.- Streptococcal pharyngitis: 1.060.- Estreptococos 1.060.- Streptococci: 1.061.- Infección de la garganta 1.061.- Strep throat: 1.062.- Ictus, ataque 1.062.- Stroke: 1.063.- Volumen sistólico 1.063.- Stroke volume: 1.064.- Taponamiento 1.064.- Stuffiness: 1.065.- Saturación 1.065.- Stuffy: 1.066.- Orzuelo 1.066.- Sty: 1.067.- Apófisis estiloides 1.067.- Styloid process: 1.068.- Saturacion 1.068.- Stuffiness: 1.069.- Hemorragia subaracnoidea 1.069.- Subarachnoid hemorrhage: 1.070.- Submaxilar 1.070.- Submandibular: 1.071.- Nódulo submentoniano, ganglio 1.071.- Submental node: submentoniano 1.072.- Succión 1.072.- Sucking:

- 1.073.- Sulcus:
- 1.074.- Superficial retinal hemorrhage:
- 1.075.- Supine position:
- 1.076.- Supple:
- 1.077.- Surgical revascularization:
- 1.078.- Surrounding:
- 1.079.- Sustained nystagmus:
- 1.080.- Suture line:
- 1.081.- Swinging flashlight test:
- 1.082.- Sympathetic nerve supply:
- 1.083.- Sympathetic nervous system:
- 1.084.- Symphysis pubis:
- 1.085.- Symptomatic limb ischemia:
- 1.086.- Systemic bacteremia:
- 1.087.- Systolic blood pressure (SBP):
- 1.088.- Systolic ejection murmur:

- 1.073.- Cisura, surco
- 1.074.- Hemorragia superficial de la retina
- 1.075.- Posición de decúbito supino
- 1.076.- Flexible, blando
- 1.077.- Revascularización quirúrgica
- 1.078.- Circundante
- 1.079.- Nistagmo sostenido
- 1.080.- Línea de sutura
- 1.081.- Prueba de la linterna rítmica
- 1.082.- Suministro del nervio simpático
- 1.083.- Sistema nervioso simpatico
- 1.084.- Sínfisis púbica
- 1.085.- Isquemia sintomática del miembro
- 1.086.- Bacteriemia sistémica
- 1.087.- Presión arterial sistólica
- 1.088.- Soplo sistólico eyectivo

T

- 1.089.- Tangential lighting:
- 1.090.- Tapering:
- 1.091.- Target organ:
- 1.092.- Tarsal plate:
- 1.093.- Telangiectatic vessel:
- 1.094.- Tender:
- 1.095.- Tenderness:
- 1.096.- Tendon réflex:
- 1.097.- Tension headache:
- 1.098.- Tessellation:
- 1.099.- Testes:
- 1.100.- Testicular neoplasm:
- 1.101.- Testicular self-examination:

- 1.089.-Luz tangent
- 1.090.- Estrechamiento cónico
- 1.091.- Órgano diana
- 1.092.- Placa tarsal
- 1.093.- Vaso telangiectásico
- 1.094.- Doloroso, sensible,

hipersensible

- 1.095.- Hipersensibilidad, dolor, sensibilidad
- 1.096.- Reflejo tendinoso
- 1.097.- Cefalea tensional
- 1.098.- Teselación, en forma de mosaico
- 1.099.- Testículos
- 1.100.- Neoplasia testicular
- 1.101.- Auto-exploración testicular

1.102.- Testis: 1.102.- Testículo 1.103.- Throbbing: 1.103.- Palpitante, púlsatil 1.104.- Thromboangiitis obliterans: 1.104.- Tromboangeitis obliterante 1.105.- Thrombosed hemorrhoid: 1.105.- Hemorroide trombosada 1.106.- Thrush: 1.106.- Muguet 1.107.- Thyroid-stimulating hormone: 1.107.- Hormona estimulante de la tiroides, tirotropina 1.108.- AIT (accidente isquémico 1.108.- TIA: transitorio) 1.109.- Timing: 1.109.-Cronología, momento de aparición, tiempo 1.110.- Hormigueo, tinnitus, repiqueteo 1.110.- Tingling: 1.111.- Tinnitus: 1.111.- Acúfenos 1.112.- Tip: 1.112.- Punta, extremo 1.113.- Tissue: 1.113.- Tejido 1.114.- TM (Tympanic membrane): 1.114.- MT (Membrana timpánica) 1.115.- Tongue blade: 1.115.- Paleta para la lengua 1.116.- Tonsilitis: 1.116.- Amigdalitis 1.117.- Tonsillar: 1.117.- Amigdalino 1.118.- Tophi: 1.118.- Tofo 1.119.- Tophaceous gout: 1.119.- Gota tofácea 1.120.- Tophus: 1.120.- Tofo 1.121.- Tori mandibular: 1.121.- Rodete mandibular 1.122.- Torus palatinus: 1.122.- Rodete palatino 1.123.- Cariamiento del diente 1.123.- Tooth decay: 1.124.- Toxigenic escherichia coli: 1.124.-. Escherichia coli toxigénica 1.125.- Trace edema: 1.125.- Oligo edema 1.126.- Tract: 1.126.- Conducto 1.127.- Tragus: 1.127.- Trago 1.128.- Transfer dysphagia: 1.128.- Disfagia de transferencia 1.129.- Transmitted voice sound: 1.129.- Transmisión del sonido vocálico, sonido vocálico transmitido 1.130.- Trapezia muscle: 1.130.- Músculo trapecio 1.131.- Traube's space: 1.131.- Espacio de Traube 1.132.- Tremor: 1.132.- Temblor 1.133.- Triangular nodule: 1.133.- Nódulo piramidal 1.134.- Triceps: 1.134.- Trícipital, triceps 1.135.- Trichilemmal: 1.135.- Triquilema 1.136.- Nervio trigémino 1.136.- Trigeminal nerve: 1.137.- Trigeminal neuralgia: 1.137.- Neuralgia del trigémino

- 1.138.- Trochanteric bursitis:
- 1.139.- True diastolic pressure:
- 1.140.- Truncal fat:
- 1.141.- TSE (Testicular self examination):
- 1.142.- Tuberculin test:
- 1.143.- Tunica vaginalis:
- 1.144.- Tuning fork:
- 1.145.- Turbinate:
- 1.146.- Turner's syndrome:
- 1.147.- Tympany:

U

- 1.148.- Ulcerative colitis:
- 1.149.- Ulna distal:
- 1.150.- Ulnar artery:
- 1.151.- Umbo:
- 1.152.- Unconjugated bilirubin:
- 1.153.- Underlying:
- 1.154.- Unduly:
- 1.155.- Unilateral conductive hearing loss:
- 1.156.- Unilateral sensorineural hearing loss:
- 1.157.- Upstroke:
- 1.158.- Urge incontinence:
- 1.159.- Urinalysis:
- 1.160.- Urinary stone:
- 1.161.- Urinary stream:
- 1.162.- Urination:
- 1.163.- Uterine myomata:
- 1.164.- Uterine cérvix:

- 1.138.- Bursitis trocantérica
- 1.139.- Presión diastólica verdadera
- 1.140.- Grasa troncular, grasa troncal
- 1.141.- Auto exploración testicular
- 1.142.- Prueba de tuberculina
- 1.143.- Túnica vaginal
- 1.144.- Diapasón
- 1.145.- Cornete
- 1.146.- Syndrome de Turner
- 1.147.- Timpanismo, timpánico

- 1.148.- Colitis ulcerosa
- 1.149.- Cúbito distal
- 1.150.- Arteria cubital
- 1.151.- Ombligo de la membrana del tímpano
- 1.152.- Bilirrubina no conjugada
- 1.153.- Subyacente
- 1.154.- Apresivo
- 1.155.- Pérdida auditiva conductiva unilateral
- 1.156.- Pérdida auditiva neurosensorial unilateral
- 1.157.- Onda de presión
- 1.158.- Incontinencia por impulso,
- incontinencia por urgencia
- 1.159.- Análisis de orina
- 1.160.- Cálculo renal
- 1.161.- Flujo urinario
- 1.162.- Micción
- 1.163.- Mioma uterino
- 1.164.- Cuello uterino

V

- 1.165.- Vagal nerve:
- 1.166.- Valsalva maneuver:
- 1.167.- Valvular aortic stenosis:
- 1.168.- Vas deferens:
- 1.169.- Vasa deferentia:
- 1.170.- Vascular cushion:
- 1.171.- Vascular occlusive disease:
- 1.172.- Vasoactive intestinal peptide (VIP):
- 1.173.- Vasolidation:
- 1.174.- Vault:
- 1.175.- Venereal wart:
- 1.176.- Venipuncture:
- 1.177.- Venous engorgement:
- 1.178.- Venous hum:
- 1.179.- Venous stasis ulcer:
- 1.180.- Venous tapering:
- 1.181.- Vertex:
- 1.182.- Vessel:
- 1.183.- Vibrating tuning fork:
- 1.184.- Vibrio cholerae:
- 1.185.- Villous adenoma:
- 1.186.- Visceral nerve supply:
- 1.187.- Viscus:
- 1.188.- Vitreous floater:
- 1.189.- Voiding:
- 1.190.- Voluntary guarding:
- 1.191.- Volvulus:
- 1.192.- Vomiting:

- 1.165.- Nervio vago
- 1.166.- Maniobra de Valsalva
- 1.167.- Estenosis aórtica valvular
- 1.168.- Conducto deferente
- 1.169.- Conductos deferentes
- 1.170.- Cojinete vascular
- 1.171.- Enfermedad vascular oclusiva
- 1.172.- Péptido intestinal vasoactivo
- 1.173.- Vasodilatación
- 1.174.- Bóveda
- 1.175.- Verruga venérea
- 1.176.- Venopunción
- 1.177.- Ingurgitación venosa
- 1.178.- Soplo venoso
- 1.179.- Úlcera por estasis venosa
- 1.180.- Estrechamiento cónico venoso
- 1.181.- Vértice
- 1.182.- Vaso
- 1.183.- Bifurcación vibratoria afinada
- 1.184.- Vibrio cólera
- 1.185.- Adenoma velloso
- 1.186.- Inervación visceral
- 1.187.- Víscera
- 1.188.- Flotador vítreo
- 1.189.- Evacuación, vaciar
- 1.189.- Resistencia voluntaria
- 1.191.- Vólvulo
- 1.192.- Vómito

W

- 1.193.- Verruga 1.193.- Wart: 1.194.- Acuoso 1.194.- Watery: 1.195.- Cerumen, cera 1.195.- Wax: 1.196.- Cansancio 1.196.- Weariness: 1.197.- Weber test: Weber 1.198.- Wens: 1.199.- Wharton's duct: 1.200.- Wheal: 1.201.- Wheezing: 1.202.- Whiff test: 1.203.- Whisper test: 1.204.- Whispered voice: 1.205.- White-centered retinal hemorrhage: blanco 1.206.- White coat hypertension: 1.207.- Whooping cough: 1.208.- Wincing: 1.209.- Wisdom tooth: 1.210.- Withdrawal: 1.211.- Wrinkle: 1.212.- Wt (Weight): Х 1.213.- Xiphoid process: 1.214.- Yawn:
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 - 1.210.- Abstinencia, abandono
 - 1.211.- Arruga
 - 1.212.- Peso

1.213.- Apéndice xifoides

1.215.- Yeast infection:

1.214.- Bostezar, bostezo 1.215.- Infección de levadura 1.216.- Zygomatic bone:

1.216.- Hueso cigomático

Z