



MODUL PEMBELAJARAN

BAHASA INGGRIS I

Penulis:
Ifa Nofalia, M.Kep.
Dwi Presetyaningati, M.Kep.



**PROGRAM STUDI S1 ILMU KEPERAWATAN
SEKOLAH TINGGI ILMU KESEHATAN
INSAN CENDEKIA MEDIKA
JOMBANG
2018**

KATA PENGANTAR

Puji serta syukur Kami panjatkan ke hadirat Allah SWT yang Telah memberikan rahmat dan hidayah-Nya kepada saya sehingga Modul ini dapat tersusun. Modul ini diperuntukkan bagi mahasiswa Program Studi S1 Ilmu Keperawatan STIKes Insan Cendekia Medika Jombang.

Diharapkan mahasiswa yang mengikuti kegiatan pembelajaran dapat mengikuti semua kegiatan dengan baik dan lancar. Penulis menyadari bahwa dalam penyusunan modul ini tentunya masih terdapat beberapa kekurangan, sehingga penulis bersedia menerima saran dan kritik dari berbagai pihak untuk dapat menyempurnakan modul ini di kemudian hari. Semoga dengan adanya modul ini dapat membantu proses belajar mengajar dengan lebih baik lagi.

Jombang, September 2018

Penulis

PENYUSUN

Penulis

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Penerbit

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PETUNJUK PENGGUNAAN MODUL

A. Petunjuk Bagi Dosen

Dalam setiap kegiatan belajar dosen berperan untuk:


1. Membantu mahasiswa dalam merencanakan proses belajar
2. Membimbing mahasiswa dalam memahami konsep, analisa, dan menjawab pertanyaan mahasiswa mengenai proses belajar.
3. Mengorganisasikan kegiatan belajar kelompok.

B. Petunjuk Bagi Mahasiswa

Untuk memperoleh prestasi belajar secara maksimal, maka langkah-langkah yang perlu dilaksanakan dalam modul ini antara lain:

1. Bacalah dan pahami materi yang ada pada setiap kegiatan belajar. Bila ada materi yang belum jelas, mahasiswa dapat bertanya pada dosen.
2. Kerjakan setiap tugas diskusi terhadap materi-materi yang dibahas dalam setiap kegiatan belajar.
3. Jika belum menguasai level materi yang diharapkan, ulangi lagi pada kegiatan belajar sebelumnya atau bertanyalah kepada dosen.

RENCANA PEMBELAJARAN SEMESTER

	SEKOLAH TINGGI ILMU KESEHATAN INSAN CENDEKIA MEDIKA JOMBANG PROGRAM STUDI S1 ILMU KEPERAWATAN		
RENCANA PEMBELAJARAN SEMESTER (RPS)			
No. Dokumen	No. Revisi	Hal	Tanggal Terbit 30 Juli 2018
Matakuliah : Bahasa Inggris 1	Semester: I (Satu)	SKS : 4 SKS	Kode MK: 01AABING1
Program Studi : S1 Ilmu Keperawatan	Dosen Pengampu/Penanggungjawab : Hartatik, S.Kep.,Ns. Dwi Prasetyaningati, S.Kep.,Ns. M.Kep (DP) Ifa Nofalia, S.Kep.,Ns.M.,Kep (IN)		
Capaian Pembelajaran Lulusan (CPL)	Sikap <ol style="list-style-type: none"> a. Bertakwa kepada Tuhan Yang Maha Esa dan mampu menunjukkan sikap religius b. Menjunjung tinggi nilai kemanusiaan dalam menjalankan tugas berdasarkan agama, moral, dan etika c. Menginternalisasi nilai, norma, dan etika akademik d. Berperan sebagai warga negara yang bangga dan cinta tanah air, memiliki nasionalisme serta rasa tanggungjawab pada negara dan bangsa e. Menghargai keanekaragaman budaya, pandangan, agama, dan kepercayaan, serta pendapat atau temuan orisinal orang lain f. Berkontribusi dalam peningkatan mutu kehidupan bermasyarakat, berbangsa, bernegara, dan kemajuan peradaban berdasarkan pancasila; g. Bekerja sama dan memiliki kepekaan sosial serta kepedulian terhadap masyarakat dan lingkungan h. Taat hukum dan disiplin dalam kehidupan bermasyarakat dan bernegara i. Menginternalisasi semangat kemandirian, kejuangan, dan kewirausahaan j. Menunjukkan sikap bertanggungjawab atas pekerjaan di bidang keahliannya secara mandiri 		

CP Keterampilan Khusus

Sub mata kuliah ini membahas tentang : *Greeting & Introduction, Sick expression, Communication in admission, Direction to place and department, Health examination, Nursing instruction, Part of body, Hospital equipment, Offering something – 1, Offering something – 2, Explaining disease – 1, Explaining disease – 2, Explaining disease – 3, Explaining disease – 4, Procedure : hand washing, Procedure : sterilizing instrument.* Pemahaman ilmu tersebut sebagai pegangan dalam memberikan asuhan keperawatan vokasional secara komprehensif.

CP Pengetahuan

Setelah mengikuti kegiatan pembelajaran keperawatan gawat darurat, setelah diberi data/kasus/artikel mahasiswa mampu :

- a. Menjelaskan Greeting & Introduction : Macam-macam greeting expression, Penggunaan greeting expression dan Health expression
- b. Menjelaskan Sick expression : Macam-macam ekspresi sakit (sick expression), Telling patient problems
- c. Menjelaskan Communication in admission : Komunikasi saat masuk, Kosa kata (Vocabulary) yang sering digunakan, Contoh percakapan
- d. Menjelaskan Direction to place and department : Istilah-istilah ruangan rumah sakit, Kosa kata (Vocabulary) penunjuk arah, Komunikasi penunjukan arah
- e. Menjelaskan Health examination : Istilah dalam pemeriksaan fisik, Perintah-perintah dalam pemeriksaan fisik dan Komunikasi dalam pemeriksaan fisik
- f. Menjelaskan Nursing instruction : Istilah-istilah dalam instruksi perawat
- g. Menjelaskan Part of body : Bagian-bagian tubuh
- h. Menjelaskan Hospital equipment : Berbagai peralatan rumah sakit
- i. Menjelaskan Offering something – 1 : Manawarkan makan dan minum, Manawarkan BAB / BAK dan Menawarkan mandi
- j. Menjelaskan Offering something – 2 : Manawarkan makan dan minum, Manawarkan BAB / BAK dan Menawarkan mandi
- k. Menjelaskan Explaining disease – 1 : Diarrhoe, Hepatitis virus, Heart attack, Dengue hemorrhagic fever, Poliomyelitis, Asthma bronchiale, Pneumonia, Arthritis dan Meningitis

	<p>l. Menjelaskan Explaining disease – 2 : Diarrhoe, Hepatitis virus dan Heart attack</p> <p>m. Menjelaskan Explaining disease – 3 : Dengue hemorrhagic fever, Poliomyelitis dan Asthma bronchiale</p> <p>n. Menjelaskan Explaining disease – 4 : Pneumonia, Arthritis dan Meningitis</p> <p>o. Menjelaskan Procedure : hand washing = prosedur cuci tangan</p> <p>p. Menjelaskan Procedure : sterilizing instrument = prosedur sterilisasi alat</p>
<p>Capaian Pembelajaran Mata kuliah (CPMK)</p>	<ol style="list-style-type: none"> 1. Menjelaskan Greeting & Introduction : Macam-macam greeting expression, Penggunaan greeting expression dan Health expression 2. Menjelaskan Sick expression : Macam-macam ekspresi sakit (sick expression), Telling patient problems 3. Menjelaskan Communication in admission : Komunikasi saat masuk, Kosa kata (Vocabulary) yang sering digunakan, Contoh percakapan 4. Menjelaskan professional staff in hospital : physician, nursing, nutritionist, pharmacist, ext 5. Mendeskripsikan unit pelayanan di rumah sakit : ward, radiology, laboratory, pharmacy, ext 6. Menjelaskan Direction to place and department : Istilah-istilah ruangan rumah sakit, Kosa kata (Vocabulary) penunjuk arah, Komunikasi penunjukan arah 7. Menjelaskan Health examination : Istilah dalam pemeriksaan fisik, Perintah-perintah dalam pemeriksaan fisik dan Komunikasi dalam pemeriksaan fisik 8. Menjelaskan Nursing instruction : Istilah-istilah dalam instruksi perawat 9. Menjelaskan Part of body, anatomical position : Bagian-bagian tubuh 10. Menjelaskan Hospital equipment : Berbagai peralatan rumah sakit 11. Menjelaskan Offering something : Manawarkan makan dan minum, Manawarkan BAB / BAK dan Manawarkan mandi, taking medicine 12. Menjelaskan Explaining disease – 1 : Diarrhoe, Typus Abdominalis, Appendicitis, Dengue Hemoragic Fever 13. Menjelaskan Explaining disease – 2 : Influenza, Asthma, Tuberculosis, Hearth Attack 14. Menjelaskan Explaining disease – 3 : Traffic Accident, Injury / wound, Poisoning 15. Menjelaskan Procedure : hand washing = prosedur cuci tangan 16. Menjelaskan Procedure : sterilizing instrument = prosedur sterilisasi alat

Deskripsi Mata kuliah		Mata kuliah Bahasa Inggris merupakan mata kuliah tambahan sebagai peningkatan pengetahuan Mahasiswa dalam memahami serta mempraktekkan konsep Bahasa Inggris yang dipadukan dan dimasukkan dengan ilmu keperawatan. Mata kuliah ini memberikan kemampuan kepada mahasiswa untuk memahami isi jurnal, artikel dan buku-buku referensi dengan pokok bahasan : grammar, reading comprehension, speaking and conversation, listening comprehension, and translation/writing skill.					
Minggu ke -	Kemampuan yang diharapkan (Sub-CPMK)	Bahan Kajian/Materi Pembelajaran	Metode Pembelajaran dan Pengalaman Belajar/ fasilitator	Waktu	Penilaian		
					Teknik	Kriteria/ Indikator	Bobot (%)
1	Menjelaskan Greeting & Introduction	<ul style="list-style-type: none"> • Grammar • Structure 	Mini Lecture (DP)	4x50 menit	1. Tes tertulis (UTS) 2. Penilaian Tugas : Terstruktur a. Individu b. Kelompok 3. Presentation	<ul style="list-style-type: none"> • Grammar • Structure 	5%
2	Menjelaskan Sick expression	<ul style="list-style-type: none"> • Macam-macam greeting expression • Penggunaan greeting expression • Health expression 	Mini Lecture (DP) Role Play	4x50 menit		<ul style="list-style-type: none"> • Macam-macam greeting expression • Penggunaan greeting expression • Health expression 	10%
3	Menjelaskan Communication in admission	<ul style="list-style-type: none"> • Macam-macam ekspresi sakit (sick expression) • Telling patient problems 	Lecture (DP) Role Play	4x50 menit		<ul style="list-style-type: none"> • Macam-macam ekspresi sakit (sick expression) • Telling patient problems 	10%
4	Menjelaskan professional staff in hospital	<ul style="list-style-type: none"> • Komunikasi saat masuk • Kosakata (Vocabulary) yang sering digunakan 	Lecture (DP) Role Play	4x50 menit		<ul style="list-style-type: none"> • Komunikasi saat masuk • Kosakata (Vocabulary) yang sering digunakan 	5%

		<ul style="list-style-type: none"> • Contoh percakapan 				<ul style="list-style-type: none"> • Contoh percakapan 	
5	Mendesripsikan unit pelayanan di rumah sakit dan Hospital equipment	<ul style="list-style-type: none"> • Physician • Nursing • Nutrisionist • Pharmacist Ext 	Lecture Role Play (DP)	4x50 menit		<ul style="list-style-type: none"> • Physician • Nursing • Nutrisionist • Pharmacist Ext 	10%
6	Menjelaskan Direction to place and department	<ul style="list-style-type: none"> • Ward • Radiology • Laboratory • Pharmacy 	Lecture (DP)	4x50 menit		<ul style="list-style-type: none"> • Ward • Radiology • Laboratory • Pharmacy 	10%
UTS							
7	Menjelaskan Health examination	<ul style="list-style-type: none"> • Istilah dalam pemeriksaan fisik • Perintah-perintah dalam pemeriksaan fisik • Komunikasi dalam pemeriksian fisik 	Lecture Discovery learning (IN)	4x50 menit	1. Tes tertulis (UTS) 2. Penilaian Tugas : Terstruktur a. Individu b. Kelompok 3. Presentation	<ul style="list-style-type: none"> • Istilah dalam pemeriksaan fisik • Perintah-perintah dalam pemeriksaan fisik • Komunikasi dalam pemeriksian fisik 	5%
8	Menjelaskan Nursing instruction	<ul style="list-style-type: none"> • Istilah-istilah dalam instruksi perawat 	Lecture Role Play (IN)	4x50 menit		<ul style="list-style-type: none"> • Istilah-istilah dalam instruksi perawat 	5%
9	Menjelaskan Part of body	<ul style="list-style-type: none"> • Bagian-bagian tubuh 	SGD (IN)	4x50 menit		<ul style="list-style-type: none"> • Bagian-bagian tubuh 	10%
10	Menjelaskan Offering	<ul style="list-style-type: none"> • Menawarkan 	Lecture	4x50		<ul style="list-style-type: none"> • Manawarkan 	5%

	something -		<ul style="list-style-type: none"> • minum • Menawarkan BAK • Menawarkan mandi • Taking medicine 	Discovery learning (IN)	menit		<ul style="list-style-type: none"> • minum • Menawarkan BAK • Menawarkan mandi • Taking medicine 	
11			<ul style="list-style-type: none"> • Manawarkan makan • Manawarkan BAB 	Lecture Discovery learning (IN)	4x50 menit		<ul style="list-style-type: none"> • Manawarkan makan • Manawarkan BAB 	
12	Menjelaskan disease - 1	Explaining	<ul style="list-style-type: none"> • Diarrhoe • Typus Abdominalis • Appendicitis • Dengue hemorrhagic fever 	Case studi dan SGD (IN)	4x50 menit		<ul style="list-style-type: none"> • Diarrhoe • Typus Abdominalis • Appendicitis • Dengue hemorrhagic fever 	10%
13	Menjelaskan disease - 2	Explaining	<ul style="list-style-type: none"> • Influenza (cold and cough) • Asthma • Tuberculosis • Heart attack 	Case Studi dan SGD (IN)	4x50 menit		<ul style="list-style-type: none"> • Influenza (cold and cough) • Asthma • Tuberculosis • Heart attack 	10%
14	Menjelaskan disease - 3	Explaining	<ul style="list-style-type: none"> • Traffic Accident • Injury / woud • Poisoning 	Case Studi dan SGD (IN)	4x50 menit		<ul style="list-style-type: none"> • Traffic Accident • Injury / woud • Poisoning 	5%

	Ujian Akhir Semester						

BAB 1

PENDAHULUAN

A. Deskripsi Mata Ajar

Mata kuliah Bahasa Inggris merupakan mata kuliah tambahan sebagai peningkatan pengetahuan Mahasiswa dalam memahami serta mempraktekkan konsep Bahasa Inggris yang dipadukan dan dimasukkan dengan ilmu keperawatan. Mata kuliah ini memberikan kemampuan kepada mahasiswa untuk memahami isi jurnal, artikel dan buku-buku referensi dengan pokok bahasan : grammar, reading comprehension, speaking and conversation, listening comprehension, and translation/writing skill.

B. Capaian Pembelajaran Lulusan

1. Sikap

- k. Bertakwa kepada Tuhan Yang Maha Esa dan mampu menunjukkan sikap religius
- l. Menjunjung tinggi nilai kemanusiaan dalam menjalankan tugas berdasarkan agama, moral, dan etika
- m. Menginternalisasi nilai, norma, dan etika akademik
- n. Berperan sebagai warga negara yang bangga dan cinta tanah air, memiliki nasionalisme serta rasa tanggungjawab pada negara dan bangsa
- o. Menghargai keanekaragaman budaya, pandangan, agama, dan kepercayaan, serta pendapat atau temuan orisinal orang lain
- p. Berkontribusi dalam peningkatan mutu kehidupan bermasyarakat, berbangsa, bernegara, dan kemajuan peradaban berdasarkan Pancasila;
- q. Bekerja sama dan memiliki kepekaan sosial serta kepedulian terhadap masyarakat dan lingkungan
- r. Taat hukum dan disiplin dalam kehidupan bermasyarakat dan bernegara
- s. Menginternalisasi semangat kemandirian, kejuangan, dan kewirausahaan
- t. Menunjukkan sikap bertanggungjawab atas pekerjaan di bidang keahliannya secara mandiri

2. CP Keterampilan Khusus

- a. Pemahaman ilmu tersebut sebagai pegangan dalam memberikan asuhan keperawatan vokasional secara komprehensif

3. CP Pengetahuan

Mahasiswa mampu

- a. Menjelaskan Greeting & Introduction : Macam-macam greeting expression, Penggunaan greeting expression dan Health expression
- b. Menjelaskan Sick expression : Macam-macam ekspresi sakit (sick expression), Telling patient problems
- c. Menjelaskan Communication in admission : Komunikasi saat masuk, Kosa kata (Vocabulary) yang sering digunakan, Contoh percakapan
- d. Menjelaskan Direction to place and department : Istilah-istilah ruangan rumah sakit, Kosa kata (Vocabulary) penunjuk arah, Komunikasi penunjukan arah
- e. Menjelaskan Health examination : Istilah dalam pemeriksaan fisik, Perintah-perintah dalam pemeriksaan fisik dan Komunikasi dalam pemeriksaan fisik
- f. Menjelaskan Nursing instruction : Istilah-istilah dalam instruksi perawat
- g. Menjelaskan Part of body : Bagian-bagian tubuh
- h. Menjelaskan Hospital equipment : Berbagai peralatan rumah sakit
- i. Menjelaskan Offering something – 1 : Manawarkan makan dan minum, Manawarkan BAB / BAK dan Menawarkan mandi
- j. Menjelaskan Offering something – 2 : Manawarkan makan dan minum, Manawarkan BAB / BAK dan Menawarkan mandi
- k. Menjelaskan Explaining disease – 1 : Diarrhoe, Hepatitis virus, Heart attack, Dengue hemorrhagic fever, Poliomyelitis, Asthma bronchiale, Pneumonia, Arthritis dan Meningitis
- l. Menjelaskan Explaining disease – 2 : Diarrhoe, Hepatitis virus dan Heart attack
- m. Menjelaskan Explaining disease – 3 : Dengue hemorrhagic fever, Poliomyelitis dan Asthma bronchiale
- n. Menjelaskan Explaining disease – 4 : Pneumonia, Arthritis dan Meningitis
- o. Menjelaskan Procedure : hand washing = prosedur cuci tangan
- p. Menjelaskan Procedure : sterilizing instrument = prosedur sterilisasi alat

C. Strategi Perkuliahan

Pendekatan perkuliahan ini adalah pendekatan Student Center Learning. Dimana Mahasiswa lebih berperan aktif dalam proses pembelajaran. Metode yang digunakan lebih banyak menggunakan metode ISS (Interactive skill station) dan Problem base learning. Interactive skill station diharapkan mahasiswa belajar mencari materi secara mandiri menggunakan berbagai sumber kepustakaan seperti internet, expert dan lainlain, yang nantinya akan didiskusikan dalam kelompok yang telah ditentukan. Sedangkan

untuk beberapa pertemuan dosen akan memberikan kuliah singkat diawal untuk memberikan kerangka pikir dalam diskusi. Untuk materi-materi yang memerlukan keterampilan, metode yang akan dilakukan adalah simulasi dan demonstrasi. Berikut metode pembelajaran yang akan digunakan dalam perkuliahan ini:

1. Mini Lecture
2. Role play
3. Discovery learning
4. Case Studi
5. SGD

BAB 2

KEGIATAN BELAJAR

A. Kegiatan Belajar 1

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Greeting & Introduction

2. Uraian Materi

Greeting & Introduction

Dosen: Dwi Prasetyaningati, S.Kep.,Ns. M.Kep

Greetings and Introductions Vocabulary

There are different ways to greet people in English. These are some of the most common phrases to greet people.

Greetings

1. Good Morning
2. Morning Josh
3. Morning , Guys
4. Good Afternoon
5. Good Night
6. Good Evening
7. Hi
8. Hello
9. How are you ?
10. How are you doing?
11. Howdy?
12. How is it going?
13. Hey Matthew
14. Hey, What's up
15. Hey, Buddy
16. Hey, Guys
17. Hey, What's going on?
18. What's new?

Useful expressions to respond to Greetings

These are some of the common ways to respond to some of the greetings above

1. Good to see you
2. Good to see you too
3. Great
4. I am fine
5. Fine
6. Nothing
7. Good
8. I am doing great
9. Very well thanks
10. Not bad
11. Pretty good
12. Not Good
13. Not much
14. Useful expressions for introductions
15. What's your name? My name is [Your name here]
16. This is [name of a friend]
17. I am [[name of a friend]
18. I am happy to meet you
19. Nice to see you again
20. Excuse me
21. Thanks/Thank you
22. Please
23. Nice/good to meet you
24. Nice meeting you too
25. I am from [place, school]
26. Introducing Yourself
27. The following are some expressions you can use to introduce yourself:
28. My name is
29. I'm
30. Nice to meet you. I'm
31. Pleased to meet you. I'm
32. Let me Introduce myself. I'm
33. I'd like to introduce myself, I'm
34. Introducing Others

35. Here are some expressions to introduce others:
36. Nabila, please meet Baihaqi.
37. Tania, this is Anthony, the one I told you about.
38. Maria, have you met Irene?
39. Here, I'd like you to meet Surya.
40. Rere, this is Birawa. Birawa, this is Rere.
41. Responses
42. The following are some useful responses you can say when you are being introduced:
43. Nice to meet you.
44. Pleased to meet you.
45. How do you do?

Leave-Takings

1. Bye
2. Good-Bye
3. See you
4. See You later
5. See you tomorrow
6. See you in a few (In a few means in a few minutes or hours)
7. See you around
8. Later
9. Take care

Greetings and Introduction Dialogues

Dialogue #1

Mike: Good Morning

Linda: How are you mike?

Mike: I am fine Linda

Linda: We are in the same class

Mike: That's right, Can I have your telephone number?

Linda: Sure, It is 86021456

Dialogue #2

Mike: Hello, My name is Mike

Linda: How are you Mike? I am Linda

Mike: I am fine, how about you?

Linda: I am fine too but I am a little lost.

Mike: What's your first class?

Linda: I have Spanish classes

Mike: Nice, We are classmates

Linda: That's great

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

B. Kegiatan Belajar 2

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Sick expression

2. Uraian Materi

Sick expression

Dosen: Dwi Prasetyaningati, S.Kep.,Ns. M.Kep

1) alive and kicking

- to be well and healthy

My aunt is ninety years old and she is very much alive and kicking.

2) alive and well

- to be well and healthy

The worker was alive and well after the accident.

3) as fit as a fiddle

- to be healthy and physically fit

My grandfather is ninety years old but he is as fit as a fiddle.

4) as pale as a ghost

- extremely pale

My grandfather was as pale as a ghost when he entered the hospital.

5) as pale as death

- extremely pale

The woman in the hospital waiting room was as pale as death.

6) at death's door

- very near death

The sales manager was at death's door after his heart attack.

7) back on one's feet

- physically healthy again

My mother is back on her feet after being sick for two weeks.

8) bitter pill to swallow

- an unpleasant fact that one must accept

Losing the election was a bitter pill to swallow for the candidate.

9) black-and-blue

- bruised, showing signs of having been physically harmed

My arm was black-and-blue after falling down the stairs.

10) black out

- to lose consciousness, to faint, to pass out

The football player blacked out after being hit by the other player.

11) break down

- to lose control of one's emotions, to have a nervous collapse

The woman broke down while the lawyer questioned her at the trial.

12) break out in a cold sweat

- to perspire from fever or anxiety

I usually break out in a cold sweat when I have to make a speech.

13) break out in (something)

- to begin showing a rash or other skin disorder

I broke out in a rash after eating the shrimp at the restaurant.

14) breathe one's last

- to die

The man breathed his last after a long illness.

15) bring (someone) around

- to restore someone to health or consciousness, to cure someone

The medical workers were able to bring the man around after the accident.

16) bring (someone) to

- to restore someone to consciousness after anesthesia/hypnosis/fainting

We tried hard to bring the woman to after the car accident.

17) bundle of nerves

- a very nervous or anxious person

The woman is a bundle of nerves after looking after her three children.

18) burn (oneself) out

- to become very tired and almost sick from doing something for a long time or from working too hard

After working long hours for many months the woman finally burned herself out.

19) catch a cold

- to get a cold

I caught a cold last week and had to miss four days of work.

20) catch one's death of cold

- to become very ill (with a cold/flu etc.)

The little boy was told to be careful in the rain or he would catch his death of cold.

21) check-up

- an examination of a patient by a doctor

I plan to have my annual check-up next week.

22) clean bill of health

- a report or certificate that a person or animal is healthy

My doctor gave me a clean bill of health when I visited him last month.

23) come down with (something)

- to become sick with something, to catch an illness

My niece came down with a cold and was unable to visit me last week.

24) couch doctor

- a psychoanalyst or psychiatrist who puts his patients on a couch to talk to them

The man was sent to see a couch doctor because of his many problems.

25) die a natural death

- to die by disease or of old age and not by an accident or by violence

My grandfather was very old and he died a natural death.

26) a dose of one's own medicine

- the same treatment that one gives to others (usually this has a negative meaning)

We gave the boy a dose of his own medicine after he bullied us.

27) draw blood

- to make someone bleed, to get blood from someone

The doctor decided to draw blood from the patient in order to check his blood sugar level.

28) drop dead

- to die suddenly

The bus driver dropped dead while driving the bus.

29) fall ill

- to become sick or ill

The man fell ill last winter and has not recovered yet.

30) feel fit

- to feel well and healthy

I feel fit so I plan to go for a long walk this weekend.

31) feel on top of the world

- to feel very healthy

I have been feeling on top of the world since I quit my job.

32) fill a prescription

- to get some medicine from a pharmacy (drug store) with the orders from a doctor
The man went to the drug store to fill a prescription.

33) flare up

- to begin again suddenly (an illness or a disease)
My mother's skin problem flared up when she started to use the new hand soap.

34) a flare-up

- a sudden worsening of a health condition
There was a flare-up of my father's sickness last week.

35) get a black eye

- to get a bruise or darkened eye after being hit or after bumping into something
The boy got a black eye when he fell in the playground.

36) get a charley horse

- to develop a cramp in the arm or the leg
The swimmer got a charley horse while he was swimming.

37) get a checkup

- to receive a physical examination from a doctor
I go to the doctor every year to get a checkup.

38) get over (something)

- to overcome a difficulty, to recover from an illness or shock
The woman is having trouble getting over her father's death.

39) get sick

- to become ill
I got sick yesterday and did not go to the movie.

40) get (something) out of one's system

- to get rid of the desire to do something
I went on a short holiday so that I could get travelling out of my system.

41) get well

- to become well, to become healthy again
The boy was sick but now he is getting well.

42) give birth

- to have a baby
The woman gave birth to a baby boy last night.

43) go under the knife

- to have an operation in surgery

The woman went under the knife at the hospital last evening.

44) green around the gills

- to look sick

My colleague was looking a little green around the gills when he came to work today.

45) hang out one's shingle

- to open an office or business - especially in a profession

The doctor decided to hang out his shingle as soon as he finished medical school.

46) have a physical (examination)

- to get a medical check-up

Our company sent all the employees to have a physical last week.

47) have foot-in-mouth disease

- to embarrass oneself through a silly mistake

The man has foot-in-mouth disease and is always saying stupid things.

48) have one foot in the grave

- to be near death (usually because of old age or illness)

My uncle is very sick and has one foot in the grave.

49) head shrinker

- a psychiatrist

The man went to see a head shrinker after his recent problems at work.

50) in a family way

- pregnant, going to have a baby

Our new secretary is in a family way and plans to stop working soon.

51) in good shape/condition

- in good physical condition, functioning or working well

My grandfather is in very good shape.

52) in labor

- a woman going through childbirth

The woman was in labor for three hours.

53) in remission

- a disease that seems to be getting better

The cancer of my neighbor's mother has been in remission for several months.

54) in surgery

- undergoing surgery, doing surgery

The patient was in surgery for several hours this morning.

55) in the best of health

- very healthy

My father has been in the best of health for many years.

56) in the pink

- in very good health

My grandmother is in the pink and is doing very well.

57) just what the doctor ordered

- exactly what is needed or wanted

A nice hot bath was just what the doctor ordered after my long day at work.

58) kick a habit

- to break or stop a bad habit

The man used to smoke but he was able to kick the habit.

59) kink in one's neck

- a cramp in one's neck that causes pain

I woke up this morning with a kink in my neck.

60) lapse into a coma

- to go into a coma

The woman lapsed into a coma soon after the accident.

61) look the picture of health

- to be in good health, to look very healthy

My uncle looked the picture of health when I saw him last week.

62) nothing but skin and bones

- to be very thin or emaciated

The young man was nothing but skin and bones when he returned from the long camping trip.

63) nurse (someone) back to health

- to give someone care to restore him or her to good health

My mother spent several weeks with my grandmother trying to nurse her back to health.

64) on medication

- taking medicine for a current medical problem

The woman has been on medication for many years.

65) on the mend

- becoming better, becoming well, healing

My grandfather is on the mend after he broke his leg last week.

66) an ounce of prevention is worth a pound of cure

- it is easier to prevent something bad than to deal with the results

An ounce of prevention is worth a pound of cure and I decided to stay home and rest rather than go out in the cold with my sore throat.

67) out cold

- unconscious, to have fainted

The patient was out cold because of the anesthesia when he entered the operating room.

68) out of condition

- not in good physical condition

I am out of condition and I need to exercise more.

69) out of shape

- not in good physical condition

My mother is out of shape and cannot walk for a long distance.

70) out of sorts

- not feeling well, in a bad mood

Our boss is out of sorts today so you should wait until tomorrow to speak to him.

71) over the worst

- recovering from an illness

The man is over the worst since his skiing accident last month.

72) pale around the gills

- to look sick

My colleague was looking a little pale around the gills when he came to work today.

73) pass away

- to die

The man's father passed away when he was 96 years old.

74) pass on

- to die

My grandmother passed on when she was 92 years old.

75) pass out

- to faint

Three teenage girls passed out at the rock concert.

76) pick up a cold/influenza

- to acquire an illness

The boy picked up a cold during the weekend.

77) picture of health

- a perfect example of health

The man is feeling very well and is the picture of health.

78) pull through

- to recover from a serious illness

The car accident was very bad and I do not think that the driver will pull through.

79) refill a prescription

- to sell a second set of medicine on a doctor's orders

I went to the pharmacy to refill a prescription for my mother.

80) rub salt in (someone's) wound

- to deliberately make someone's unhappiness or shame or misfortune worse

My supervisor rubbed salt in my wound when he continued to criticize me for my mistake.

81) run a fever/temperature

- to have a higher than normal body temperature

The girl has been running a fever this week.

The little boy is running a temperature and should stay in bed all day.

82) run down

- to be in poor condition

My father worked very hard last month and now he is run down.

83) run in the family

- to be a common family characteristic

The serious illness runs in the family of my friend.

84) run some tests

- to do some medical tests on a patient

The doctor decided to run some tests on the patient.

85) show signs of an illness

- to show indications or hints of an illness

The man was beginning to show signs of some kind of illness.

86) sick in bed

- to remain in bed while you are sick

My father was sick in bed for three days last week.

87) spit up (something) or spit (something) up

- to throw something up, to vomit something

The dog spit up the button that he had swallowed.

88) splitting headache

- a severe headache

I have been suffering from a splitting headache all morning.

89) susceptible to (something)

- to easily get some kind of illness, to likely to become sick with something

The young boy is very susceptible to getting a sore throat.

90) take a sick day

- to be absent from work and still receive pay

I did not feel well yesterday so I decided to take a sick day.

91) take a turn for the better

- to begin to improve or get well

The medical condition of my uncle has recently taken a turn for the better.

92) take a turn for the worse

- to become sicker

My aunt took a turn for the worse last week and she is now in the hospital.

93) take one's medicine

- to swallow one's medicine

The boy had to take his medicine before he went to bed.

94) take sick

- to become ill

The little boy took sick early last night.

95) take (someone's) pulse

- to measure the beats of a person's pulse

The doctor took the patient's pulse when she arrived at the hospital.

96) take (someone's) temperature

- to measure someone's body temperature

The nurse took my temperature when I went to the hospital yesterday.

97) a taste of one's own medicine

- the same treatment that one gives to others (usually this has a negative meaning)

Our boss got a taste of his own medicine when people began to treat him badly like he treats others.

98) throw up

- to vomit

The woman threw up after eating the bad shellfish.

99) under the weather

- not feeling well

My boss has been under the weather all week and has not come to work during that time.

100) up and about

- healthy and moving around, not sick in bed (usually this is used after an illness)

My uncle has been up and about for a couple of days since he left the hospital.

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

C. Kegiatan Belajar 3

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Communication in admission

2. Uraian Materi

Communication in admission

Dosen: Dwi Prasetyaningati, S.Kep.,Ns. M.Kep

Critical Health Communication

Critical Health Communication refers to scholarship that interrogates "how meanings and enactments of health are tied to issues of power through the systematic construction and maintenance of inequalities."It examines links with culture, resources, and other social structures. It is distinct from mainstream Health Communication in its emphasis on qualitative and interpretive methods, and its attention to the ideological processes that underpin shared understandings of health. Unlike much mainstream Health Communication, most Critical Health Communication holds that simply circulating better quality, or more visible message about health is not enough to meaningfully influence health outcomes or correct health care disparities. The first comprehensive review of Critical Health Communication was published in 2008, and since then the volume of Health Communication research taking a critical approach has steadily increased.

Strategies and methods

Tailoring a health message is one strategy for persuasive health communication. For messages of health communication to reach selected audiences accurately and quickly, health communication professionals must assemble a collection of superior and audience appropriate information that target population segments. Understanding the audience for the information is critical to effective delivery.

Communication is an enigma that is detrimental to the healthcare world and to the resulting health of a patient. Communication is an activity that involves oral speech, voice, tone, nonverbal body language, listening and more. It is a process for a mutual understanding to come at hand during interpersonal connections. A patient's communication with their healthcare team and vice versa, affects the outcome of their health. Strong, clear, and positive relationships with physicians can chronically

improve and increase the condition of a certain patient. Through two approaches, the biomedical model and the biopsychosocial model; this can be successfully achieved. Evidence has shown that communication and its traditions have altered throughout the years. With the use of many new discoveries and the changes within our technology market, communication has severely improved and become instantaneous.

Communicators need to continually synthesize knowledge from a range of other scholarly disciplines including marketing, psychology, and behavioural sciences. Once this information has been collected, professionals can choose from a variety of methods and strategies of communication that they believe would best convey their message. These methods include campaigns, entertainment advocacy, media advocacy, new technologies, and interpersonal communication.

Campaigns

Health Communication campaigns are arguably the most utilized and effective method for spreading public health messages, especially in endorsing disease prevention (e.g. cancer, HIV/AIDS) and in general health promotion and wellness (e.g. family planning, reproductive health). The Institute of Medicine argues that health communication campaigns tend to organize their message for a diverse audience in one of three ways:

Cardiovascular disease

Three-community study and the five-city project were experimental campaigns to inform middle-aged men about the causes of cardiovascular disease. Health messages were communicated via television, radio, newspaper, cookbooks, booklets, and bus cards. The three "communities" comprised three experimental communication strategies: a media-only campaign, a media campaign supplemented with face-to-face communication, and a no-intervention control group. The experiment revealed that after one year, the most informed at-risk men were those in the second experimental group: they men consumed the media campaign and were attended by a health care provider.

Interpersonal communication

Health communication relies on strong interpersonal communication in order to influence health decisions and behaviours. The most important of these relationships are the connection and interaction between an individual and their health care provider (e.g., physician, therapist, pharmacist) and an individual's social support system (family, friends, community). These connections can positively influence the individual's decision to make healthy choices. Patients are more prone to listen when they feel invested emotionally into the situation. If they feel as if they understand what is being said, they are more prone to make objective decisions based on the information heard. Two of the most prominent areas of study in interpersonal health communication are the patient-centered and the relationship centered models of care.

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

D. Kegiatan Belajar 4

1. Kemampuan Akhir yang Diharapkan

Menjelaskan professional staff in hospital

2. Uraian Materi

Professional Staff In Hospital

Dosen: Dwi Prasetyaningati, S.Kep.,Ns. M.Kep

1. Medical records
2. Nutritionists
3. Radiographer
4. Laboratory clerk (health analyst)
5. CSSD officer (sterilizing equipment used for surgery, etc.)
6. Pharmacist
7. Laundry clerk
8. Midwife

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

E. Kegiatan Belajar -56

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Direction to place and department

2. Uraian Materi

Direction to place and department

Dosen: Dwi Prasetyaningati, S.Kep.,Ns. M.Kep

Hospitals vary widely in the services they offer and therefore, in the departments they have. Hospitals may have acute services such as an emergency department or specialist trauma center, burn unit, surgery, or urgent care. These may then be backed up by more specialist units such as cardiology or coronary care unit, intensive care unit, neurology, cancer center, and obstetrics and gynecology.

Some hospitals will also have outpatient departments and whilst others may have chronic treatment units such as behavioral health services, dentistry, dermatology, psychiatric ward, rehabilitation services (Rehab), and physical therapy. Common hospital support units include a dispensary or pharmacy, pathology, and radiology, and on the non-medical side, there often are medical records departments and/or a release of information department. Nursing services are considered one of the most important aspects in the process of distinguished medical care.

Most Common Hospital Departments

1. Accident and emergency (A&E): Also called Casualty Department, where you're likely to be taken if you have arrived in an ambulance or emergency situation.
2. Admissions: At the Admitting Department, the patient will be required to provide personal information and sign consent forms before being taken to the hospital unit or ward. If the individual is critically ill, then, this information is usually obtained from a family member.
3. Anesthetics: Doctors in this department give anesthetic for operations and procedures. An anesthetic is a drug or agent that produces a complete or partial loss of feeling. There are three kinds of anesthetic: general, regional and local.
4. Breast Screening: Screens women for breast cancer and is usually linked to the X-ray or radiology department.
5. Burn Center (Burn Unit or Burns Unit): A hospital specializing in the treatment of burns. Burn centers are often used for the treatment and recovery of patients with more severe burns.

6. Cardiology: Provides medical care to patients who have problems with their heart or circulation.
7. Central Sterile Services Department (CSSD): (Sterile Processing Department (SPD) - Sterile Processing - Central Supply Department (CSD) - Central Supply) - A place in hospitals and other health care facilities that performs sterilization and other actions on medical equipment, devices, and consumables.
8. Chaplaincy: Chaplains promote the spiritual and pastoral wellbeing of patients, relatives and staff.
9. Coronary Care Unit (CCU): (Cardiac intensive care unit (CICU) - A hospital ward specialized in the care of patients with heart attacks, unstable angina, cardiac dysrhythmia and other cardiac conditions that require continuous monitoring and treatment.
10. Critical Care: Also called intensive care, this department is for seriously ill patients.
11. Diagnostic Imaging: Also known as X-Ray Department and/or Radiology Department.
12. Discharge Lounge: Patients who don't need to stay in a ward are transferred to the lounge on the day of discharge. Many hospitals now have discharge lounges with facilities such as TV's, radio, puzzles, magazines, books and newspapers.
13. Elderly services: Covers and assists with a wide range of issues associated with seniors.
14. Finance Department: Performs all works related to budget and ideal use of the items of such budget. Also, it prepares payrolls and monthly wages, and concludes contracts of operation and maintenance and purchases. In addition, it makes available all amounts of money required for procurement of all materials and equipment.
15. Gastroenterology: This department investigates and treats digestive and upper and lower gastrointestinal diseases.
16. General Services: Support Services include services provided by Departments such as Portering, Catering, Housekeeping, Security, Health & Safety, Switch, Laundry and the management of facilities such as parking, baby tagging, access control, CCTV etc.
17. General Surgery: Covers a wide range of types of surgery and procedures on patients.

18. Gynecology: Investigates and treats problems relating to the female urinary tract and reproductive organs, such as Endometriosis, infertility and incontinence.
19. Haematology: These hospital services work with the laboratory. In addition doctors treat blood diseases and malignancies related to the blood.
20. Health & Safety: The role of the occupational health and safety department is to promote and maintain the highest possible degree of health and safety for all employees, physicians, volunteers, students and contractors, and actively participates in quality, safety and risk initiatives. Numerous health and safety issues associated with healthcare facilities include blood-borne pathogens and biological hazards, potential chemical and drug exposures, waste anesthetic gas exposures, respiratory hazards, ergonomic hazards from lifting and repetitive tasks, laser hazards, hazards associated with laboratories, and radioactive material and x-ray hazards. In addition to the medical staff, large healthcare facilities employ a wide variety of trades that have health and safety hazards associated with them. These include mechanical maintenance, medical equipment maintenance, housekeeping, food service, building and grounds maintenance, laundry, and administrative staff.
21. Intensive Care Unit (ICU): (Intensive Therapy Unit, Intensive Treatment Unit (ITU), Critical Care Unit (CCU) - A special department of a hospital or health care facility that provides intensive treatment medicine and caters to patients with severe and life-threatening illnesses and injuries, which require constant, close monitoring and support from specialist equipment and medications.
22. Human Resources: Role is to provide a professional, efficient and customer focused service to managers and staff and in turn facilitate the delivery of a professional, efficient and customer focused service to patients.
23. Infection Control: Primarily responsible for conducting surveillance of hospital-acquired infections and investigating and controlling outbreaks or infection clusters among patients and health care personnel. The department calculates rates of hospital-acquired infections, collates antibiotic susceptibility data, performs analysis of aggregated infection data and provides comparative data to national benchmarks over time.
24. Information Management: Meaningful information can be used in quality management, continuous quality improvement and peer review. By improving the

quality of information, core data can be provided for randomized clinical trials, outcomes research and many studies.

25. Maternity: Maternity wards provide antenatal care, delivery of babies and care during childbirth, and postnatal support.
26. Medical Records: Includes a variety of types of "notes" entered over time by health care professionals, recording observations and administration of drugs and therapies, orders for the administration of drugs and therapies, test results, x-rays, reports, etc.
27. Microbiology: The microbiology department provides an extensive clinical service, including mycology, parasitology, mycobacteriology, a high security pathology unit, and a healthcare associated infection investigation unit, as well as routine bacteriology and an expanding molecular diagnostic repertoire.
28. Neonatal: Closely linked with the hospital maternity department, provides care and support for babies and their families.
29. Nephrology: Monitors and assesses patients with various kidney (renal) problems and conditions.
30. Neurology: A medical specialty dealing with disorders of the nervous system. Specifically, it deals with the diagnosis and treatment of all categories of disease involving the central, peripheral, and autonomic nervous systems, including their coverings, blood vessels, and all effector tissue, such as muscle. Includes the brain, spinal cord, and spinal cord injuries (SCI).
31. Nutrition and Dietetics: Dietitians and nutritionists provide specialist advice on diet for hospital wards and outpatient clinics.
32. Obstetrics/Gynecology: Specialist nurses, midwives and imaging technicians provide maternity services such as: antenatal and postnatal care, maternal and foetal surveillance, and prenatal diagnosis.
33. Occupational Therapy: Helps physically or mentally impaired people, including temporary disability, practices in the fields of both healthcare as well as social care. Often abbreviated as "OT", Occupational Therapy promotes health by enabling people to perform meaningful and purposeful occupations. These include (but are not limited to) work, leisure, self care, domestic and community activities. Occupational therapists work with individuals, families, groups and communities to facilitate health and well-being through engagement or re-engagement in occupation.

34. **Oncology:** A branch of medicine that deals with cancer and tumors. A medical professional who practices oncology is an oncologist. The Oncology department provides treatments, including radiotherapy and chemotherapy, for cancerous tumors and blood disorders.
35. **Ophthalmology:** Ophthalmology is a branch of medicine which deals with the diseases and surgery of the visual pathways, including the eye, hairs, and areas surrounding the eye, such as the lacrimal system and eyelids. The term ophthalmologist is an eye specialist for medical and surgical problems. The Ophthalmology department provides a range of ophthalmic eye related services for both in and outpatients.
36. **Orthopaedics:** Treats conditions related to the musculoskeletal system, including joints, ligaments, bones, muscles, tendons and nerves.
37. **Otolaryngology (Ear, Nose, and Throat):** The ENT Department provide comprehensive and specialized care covering both Medical and Surgical conditions related not just specifically to the Ear, Nose and Throat, but also other areas within the Head and Neck region. It is often divided into sub-specialties dealing with only one part of the traditional specialty (ontology, rhinology and laryngology).
38. **Pain Management:** Helps treat patients with severe long-term pain. Alternative pain relief treatments such as acupuncture, nerve blocks and drug treatment, are also catered for.
39. **Patient Accounts:** The Patient Accounts Department answers all billing questions and concerns, requests for itemized bills, and account balance inquiries. The patient accounts department also assists patients in their insurance benefits for services rendered.
40. **Patient Services:** The Patient Services Manager is a source of information and can channel patient queries in relation to hospital services to the appropriate departments.
41. **Pharmacy:** Responsible for drugs in a hospital, including purchasing, supply and distribution.
42. **Physiotherapy:** Physiotherapists work through physical therapies such as exercise, massage, and manipulation of bones, joints and muscle tissues.
43. **Purchasing & Supplies:** Purchasing & Supplies Department is responsible for the procurement function of the hospital.

44. Radiology: The branch or specialty of medicine that deals with the study and application of imaging technology like x-ray and radiation to diagnosing and treating disease. The Department of Radiology is a highly specialized, full-service department which strives to meet all patient and clinician needs in diagnostic imaging and image-guided therapies.
45. Radiotherapy: Also called radiation therapy, is the treatment of cancer and other diseases with ionizing radiation.
46. Renal: Provides facilities for peritoneal dialysis and helps facilitate home Hemodialysis.
47. Rheumatology: Rheumatologists care for and treat patients for musculoskeletal disorders such as: bones, joints, ligaments, tendons, muscles and nerves.
48. Sexual Health: Also known as genitourinary medicine - Provides advice, testing and treatment for sexually transmitted infections, family planning care, pregnancy testing and advice, care and support for sexual and genital problems.
49. Social Work: Clinical social workers help patients and their families deal with the broad range of psychosocial issues and stresses related to coping with illness and maintaining health. Social workers, resource specialists and advocates form a network that addresses the challenges families face, increases accessibility to health care and other human services, and serves as a bridge between the hospital setting and a patient's family life, home and community.
50. Urology: The urology department is run by consultant urology surgeons and investigates areas linked to kidney and bladder conditions.

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

F. Kegiatan Belajar 7

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Health examination

2. Uraian Materi

Health examination

Dosen: Ifa Nofalia, S.Kep.,Ns. M.Kep

Physical examination

A nursing assessment includes a physical examination: the observation or measurement of signs, which can be observed or measured, or symptoms such as nausea or vertigo, which can be felt by the patient.

The techniques used may include inspection, palpation, auscultation and percussion in addition to the "vital signs" of temperature, blood pressure, pulse and respiratory rate, and further examination of the body systems such as the cardiovascular or musculoskeletal systems.

Focused assessment

Neurovascular assessment

The nurse conducts a neurovascular assessment to determine sensory and muscular function of the arms and legs in addition to peripheral circulation. The focused neurovascular assessment includes the objective observation of pulses, capillary refill, skin color and temperature, and sensation. During the neurovascular assessment the measures between extremities are compared. A neurovascular assessment is an evaluation of the extremities along with sensory, circulation and motor function.

Mental status

During the assessment, interactions and functioning are evaluated and documented.

Those specific items assessed include:

1. orientation, memory,
2. mood, depression, anxiety, coherence, hallucinations, illusions, insight
3. speech patterns (rate, clarity clanging)
4. grooming, personal hygiene, appropriateness of clothing
5. response to verbal and tactile stimuli, level of consciousness, and alertness
6. posture, gait, appropriateness of movements

Pain

Pain is no longer being identified as the fifth vital sign due to the prevalence of opioid abuse and over-prescribing of narcotic pain relievers. However, assessment for pain is still very important. Assessment of a patient's experience of pain is a crucial component in providing effective pain management. Pain is not a simple sensation that can be easily assessed and measured. Nurses should be aware of the many factors that can influence the patient's overall experience and expression of pain, and these should be considered during the assessment process. Systematic process of pain assessment, measurement, and re-assessment (re-evaluation), enhances the healthcare teams' ability to achieve. Pain is assessed for its provocative and palliative associations; quality, region/radiation, severity (numerical scale or pictorial, Wong-Baker Faces scale); and time—of onset, duration, frequency, and length of provocative and relief measures.

Integument

- Performing an eye exam by military nurses
- hair: quantity, location, distribution, texture
- nails: shape and color, presence of clubbing
- lesions: type, location, arrangement, color of lesions, drainage, depth, width, length
- texture, moisture, color, elasticity, turgor

Head

1. assessing the throat of a child
2. scalp, facial symmetry, sensation
3. eyes
 - acuity
 - eyelids
 - lacrimal glands
 - conjunctiva
 - visual fields
 - peripheral vision

- sclera
 - size, shape, symmetry, pupil reactions
 - movement (cranial nerves)
4. ears
- external structure
 - inner ear
 - eardrum
 - hearing (frequencies of sound detected)
 - dentation

Psychosocial assessment

The main areas considered in a psychological examination are intellectual health and emotional health. Assessment of cognitive function, checking for hallucinations and delusions, measuring concentration levels, and inquiring into the client's hobbies and interests constitute an intellectual health assessment. Emotional health is assessed by observing and inquiring about how the client feels and what he does in response to these feelings. The psychological examination may also include the client's perceptions (why they think they are being assessed or have been referred, what they hope to gain from the meeting). Religion and beliefs are also important areas to consider. The need for a physical health assessment is always included in any psychological examination to rule out structural damage or anomalies.

Safety

1. environment
2. ambulatory aids

Cultural assessment

The nursing cultural assessment will identify factors that may impede or facilitate the implementation of a nursing diagnosis. Cultural factors have a major impact on the nursing assessment. Some of the information obtained during the interview include:

1. ethnic origin
2. primary language
3. second language

4. the need for an interpreter
5. the client's main support system(s)
6. family living arrangements
7. Who is the major decision maker in the family? What are the family members' roles within the family
8. Describe religious beliefs and practices
9. Are there any religious requirements/restrictions that place limitations on the client's care?
10. Who in the family takes responsibility for health concerns?
11. Describe any special health beliefs and practices:
12. From whom does family usually seek medical assistance in time of need?
13. Describe client's usual emotional/behavioral response to: Anxiety: Anger: Loss/change/failure: Pain: Fear:
14. Describe any topics that are particularly sensitive or that the client is unwilling to discuss (because of cultural taboos):
15. Describe any activities in which the client is unwilling to participate (because of cultural customs or taboos):
16. What are the client's personal feelings regarding touch?
17. What are the client's personal feelings regarding eye contact?
18. What is the client's personal orientation to time? (past, present, future)

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

G. Kegiatan Belajar 8

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Nursing instruction

2. Uraian Materi

Nursing instruction

Dosen: Ifa Nofalia, S.Kep.,Ns. M.Kep

A. Definition

The document is a record that can be proven or used as evidence in legal matters ". While documentation is a work record or record of events and objects and activities providing services (services) that are considered valuable and important (Tungpalan, 1983). Traditionally, intervention or care plan is defined as a document handwritten in solving the problem, objectives, and interventions. As mentioned earlier, the nursing plan is a method of communication about nursing care to clients. Every client who requires nursing care need a good planning.

For example, all clients require a postoperative observation of fluids and pain management so that all nursing actions must be standardized. Planning includes the development of strategies designed to prevent, reduce or correct the problems identified in the nursing diagnosis. This stage begins after determining nursing diagnosis and concluded the plan documentation (Iyer, Taptich&bernocchi-Losey, 1996). Picture planningNursing documentation starting from data collection and analysis problems. Then the nurse include this information in maintenance records to devise a plan of care. Priority issues and the type of client based on the maintenance actions that provide corrections to the way nurses work for the achievement of objectives. Determination of a complete treatment plan is the mechanism of the nursing process.Documentation of nursing actions Planning and nursing action is the stage in the process keperawatan based on actual problems of the client.The purpose of the intervention is as an introduction to set or design maintenance actions based client response to health problems, with the goal to prevent, eliminate or minimize the causes which affect health status.

B. Purpose of intervention

The purpose of the plan of care is to provide nursing actions based on client response to health problems, and prevent new problems that will arise. Planning and nursing action is a step in the nursing process is based on the actual problems of the client.The purpose of the intervention is as an introduction to set or design

maintenance actions based client response to health problems, with the goal to prevent, eliminate or minimize the causes which affect health status.

Documentation purposes the planning stage:

- As a framework for the implementation of nursing
- It is the core of nursing documentation problem-oriented
- As a reference in making modifications to the nursing plan
- Means of communication in the nursing team delegation of tasks / nursing instruction
- As the cornerstone of ilmiah yang logical and systematic in doing nursing care to patients.
- For all the plan of action could have been adjusted so that the client's condition effectively.

C. Type of Intervention

The intention is to find an appropriate documentation as an overview of nursing interventions that include:

1. Therapeutic Intervention

Therapeutic action is a direct nursing care in accordance with the state of the client. Nursing plan that more than one must be done sincerely in order of priority problems in nursing diagnoses.

2. Intervention stabilization / observation

This process requires the sharpness of observation nurses including evaluating skills are right at the top. The program is more than a very decisive client's health. Nurses should be able to see the development of good and bad of clients such as :

- Observe vital signs.
- Awareness
- Production of urine
- Monitor blood sugar
- Nursing Diagnosis
- The act of Nursing (Therapeutic)
- Therapy Medicus
- The lack of effectiveness of airway clearance
- Anxious
- Decrease in Cardiac output

- Set the position for the provision of Oxygen
- Suction if there are no contraindications
- Teaching techniques cough
- Take a sample of arterial blood gas
- Physical examination of the heart, lung and others
- Observation emotional (behavioral, communication and others)
- Monitoring Heart
- Monitoring respiration
- Monitoring Fetal
- Teach activities to reduce stress
- Set up a safe environment
- Diverting reality orientation
- Adjust the position fowler / semi-Fowler
- Reduce movement
- Set a stimulating environment
- Manage the Oxygen
- Giving expectorant drugs
- Checking sputum
- Measuring arterial blood gas
- Provide tranquilizer sedative drugs
- Reducing diet containing sodium
- The infusion liquid electrolyte according BB
- Provide drugs to increase cardiac output.

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

H. Kegiatan Belajar 9

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Part of body

2. Uraian Materi

Part of body

Dosen: Ifa Nofalia, S.Kep.,Ns. M.Kep

The human body is composed of elements including hydrogen, oxygen, carbon, calcium and phosphorus. These elements reside in trillions of cells and non-cellular components of the body.

The adult male body is about 60% water for a total water content of some 42 litres (9.2 imp gal; 11 US gal). This is made up of about 19 litres (4.2 imp gal; 5.0 US gal) of extracellular fluid including about 3.2 litres (0.70 imp gal; 0.85 US gal) of blood plasma and about 8.4 litres (1.8 imp gal; 2.2 US gal) of interstitial fluid, and about 23 litres (5.1 imp gal; 6.1 US gal) of fluid inside cells. The content, acidity and composition of the water inside and outside cells is carefully maintained. The main electrolytes in body water outside cells are sodium and chloride, whereas within cells it is potassium and other phosphates.

Cells

The body contains trillions of cells, the fundamental unit of life. At maturity, there are roughly 30 –37 trillion cells in the body, an estimate arrived at by totaling the cell numbers of all the organs of the body and cell types. The body is also host to about the same number of non-human cells as well as multicellular organisms which reside in the gastrointestinal tract and on the skin. Not all parts of the body are made from cells. Cells sit in an extracellular matrix that consists of proteins such as collagen, surrounded by extracellular fluids. Of the 70 kg (150 lb) weight of an average human body, nearly 25 kg (55 lb) is non-human cells or non-cellular material such as bone and connective tissue.

Genome

Cells in the body function because of DNA. DNA sits within the nucleus of a cell. Here, parts of DNA are copied and sent to the body of the cell via RNA. The RNA is then used to create proteins which form the basis for cells, their activity, and their

products. Proteins dictate cell function and gene expression, a cell is able to self-regulate by the amount of proteins produced. However, not all cells have DNA; some cells such as mature red blood cells lose their nucleus as they mature.

Tissues

The body consists of many different types of tissue, defined as cells that act with a specialised function. The study of tissues is called histology and often occurs with a microscope. The body consists of four main types of tissues – lining cells (epithelia), connective tissue, nerve tissue and muscle tissue.

Cells that lie on surfaces exposed to the outside world or gastrointestinal tract (epithelia) or internal cavities (endothelium) come in numerous shapes and forms – from single layers of flat cells, to cells with small beating hair-like cilia in the lungs, to column-like cells that line the stomach. Endothelial cells are cells that line internal cavities including blood vessels and glands. Lining cells regulate what can and can't pass through them, protect internal structures, and function as sensory surfaces.

Organs

Organs, structured collections of cells with a specific function, mostly sit within the body, with the exception of skin. Examples include the heart, lungs and liver. Many organs reside within cavities within the body. These cavities include the abdomen (which contains the stomach, for example) and pleura, which contains the lungs.

Systems

The circulatory system consists of the heart and blood vessels (arteries, veins and capillaries). The heart propels the circulation of the blood, which serves as a "transportation system" to transfer oxygen, fuel, nutrients, waste products, immune cells and signalling molecules (i.e. hormones) from one part of the body to another. Paths of blood circulation within the human body can be divided into two circuits: the pulmonary circuit, which pumps blood to the lungs to receive oxygen and leave carbon dioxide, and the systemic circuit, which carries blood from the heart off to the rest of the body. The blood consists of fluid that carries cells in the circulation, including some that move from tissue to blood vessels and back, as well as the spleen and bone marrow.

Digestive system

The digestive system consists of the mouth including the tongue and teeth, esophagus, stomach, (gastrointestinal tract, small and large intestines, and rectum), as well as the liver, pancreas, gallbladder, and salivary glands. It converts food into small, nutritional, non-toxic molecules for distribution and absorption into the body. These molecules take the form of proteins (which are broken down into amino acids), fats, vitamins and minerals (the last of which are mainly ionic rather than molecular). After being swallowed, food moves through the gastrointestinal tract by means of peristalsis: the systematic expansion and contraction of muscles to push food from one area to the next.

Digestion begins in the mouth, which chews food into smaller pieces for easier digestion. Then it is swallowed, and moves through the esophagus to the stomach. In the stomach, food is mixed with gastric acids to allow the extraction of nutrients. What is left is called chyme; this then moves into the small intestine, which absorbs the nutrients and water from the chyme. What remains passes on to the large intestine, where it is dried to form feces; these are then stored in the rectum until they are expelled through the anus.

Endocrine system

The endocrine system consists of the principal endocrine glands: the pituitary, thyroid, adrenals, pancreas, parathyroids, and gonads, but nearly all organs and tissues produce specific endocrine hormones as well. The endocrine hormones serve as signals from one body system to another regarding an enormous array of conditions, and resulting in variety of changes of function.

Immune system

The immune system consists of the white blood cells, the thymus, lymph nodes and lymph channels, which are also part of the lymphatic system. The immune system provides a mechanism for the body to distinguish its own cells and tissues from outside cells and substances and to neutralize or destroy the latter by using specialized proteins such as antibodies, cytokines, and toll-like receptors, among many others.

Integumentary system

The integumentary system consists of the covering of the body (the skin), including hair and nails as well as other functionally important structures such as the sweat glands and sebaceous glands. The skin provides containment, structure, and protection for other organs, and serves as a major sensory interface with the outside world.

Lymphatic system

The lymphatic system extracts, transports and metabolizes lymph, the fluid found in between cells. The lymphatic system is similar to the circulatory system in terms of both its structure and its most basic function, to carry a body fluid.

Musculoskeletal system

The musculoskeletal system consists of the human skeleton (which includes bones, ligaments, tendons, and cartilage) and attached muscles. It gives the body basic structure and the ability for movement. In addition to their structural role, the larger bones in the body contain bone marrow, the site of production of blood cells. Also, all bones are major storage sites for calcium and phosphate. This system can be split up into the muscular system and the skeletal system.

Nervous system

The nervous system consists of the body's neurons and glial cells, which together form the nerves, ganglia and gray matter which in turn form the brain and related structures. The brain is the organ of thought, emotion, memory, and sensory processing; it serves many aspects of communication and controls various systems and functions. The special senses consist of vision, hearing, taste, and smell. The eyes, ears, tongue, and nose gather information about the body's environment.

From a structural perspective, the nervous system is typically subdivided into two component parts: the central nervous system (CNS), composed of the brain and the spinal cord; and the peripheral nervous system (PNS), composed of the nerves and ganglia outside the brain and spinal cord. The CNS is mostly responsible for organizing motion, processing sensory information, thought, memory, cognition and other such functions. It remains a matter of some debate whether the CNS directly gives rise to consciousness. The peripheral nervous system (PNS) is mostly

responsible for gathering information with sensory neurons and directing body movements with motor neurons.

From a functional perspective, the nervous system is again typically divided into two component parts: the somatic nervous system (SNS) and the autonomic nervous system (ANS). The SNS is involved in voluntary functions like speaking and sensory processes. The ANS is involved in involuntary processes, such as digestion and regulating blood pressure.

The nervous system is subject to many different diseases. In epilepsy, abnormal electrical activity in the brain can cause seizures. In multiple sclerosis, the immune system attacks the nerve linings, damaging the nerves' ability to transmit signals. Amyotrophic lateral sclerosis (ALS), also known as Lou Gehrig's disease, is a motor neuron disease which gradually reduces movement in patients. There are also many other diseases of the nervous system.

Reproductive system

The reproductive system consists of the gonads and the internal and external sex organs. The reproductive system produces gametes in each sex, a mechanism for their combination, and in the female a nurturing environment for the first 9 months of development of the infant.

Respiratory system

The respiratory system consists of the nose, nasopharynx, trachea, and lungs. It brings oxygen from the air and excretes carbon dioxide and water back into the air. First, air is pulled through the trachea into the lungs by the diaphragm pushing down, which creates a vacuum. Air is briefly stored inside small sacs known as alveoli (sing.: alveolus) before being expelled from the lungs when the diaphragm contracts again. Each alveolus is surrounded by capillaries carrying deoxygenated blood, which absorbs oxygen out of the air and into the bloodstream.

For the respiratory system to function properly, there need to be as few impediments as possible to the movement of air within the lungs. Inflammation of the lungs and excess mucus are common sources of breathing difficulties. In asthma, the respiratory

system is persistently inflamed, causing wheezing and/or shortness of breath. Pneumonia occurs through infection of the alveoli, and may be caused by tuberculosis. Emphysema, commonly a result of smoking, is caused by damage to connections between the alveoli.

Urinary system

The urinary system consists of the kidneys, ureters, bladder, and urethra. It removes toxic materials from the blood to produce urine, which carries a variety of waste molecules and excess ions and water out of the body.

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

I. Kegiatan Belajar 10 dan 11

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Offering something

2. Uraian Materi

Offering something

Dosen: Ifa Nofalia, S.Kep.,Ns. M.Kep

Offering something

Tugas dari perawat tentu saja untuk merawat dan memastikan kondisi pasien membaik dari hari ke hari. Mereka juga bertugas untuk memeriksa tekanan darah maupun gejala-gejala lain yang mungkin timbul selama dilakukan perawatan. Berikut ini merupakan beberapa contoh umum pertanyaan dari perawat kepada pasiennya :

1. Are you feeling better now?
2. How are you feeling today?
3. Have you take the medicine the doctors prescribe?
4. Have you got any other symptomp?
5. Have you eaten yet?
6. Do you feel dizzy/pain?
7. Do you need me to call the doctor?

Contoh Percakapan Perawat dan Pasien

Nurse: Good morning Ms. Ari. My name is Desi and I'll be looking after you for this morning. (Selamat pagi Nona Ari. Nama saya Desi dan saya akan merawat anda pagi ini.)

Patient: Good morning Ms. Desi. (Selamat pagi Nona Desi.)

Nurse: How are you feeling today? (Bagaimana keadaanmu hari ini?)

Patient: I'm feeling good. My fever has gone, but I'm a bit weak. (Aku merasa baik. Demamku sudah hilang, tapi masih terasa lemas.)

Nurse: Have you eaten yet? (Apa kau sudah makan?)

Patient: Yes, I've eat this morning and take my medicine. (Ya, aku sudah makan pagi ini dan sudah minum obat.)

Nurse: That's great. Do you feel nausea? (Itu bagus sekali. Apa kau merasa mual?)

Patient: Yes, I feel nausea when I'm eating but it's get better after I take the medicine. (Ya, aku merasa mual ketika makan tapi sekarang baikan setelah minum obat.)

Nurse: Let's wait for a day and you will get better. I'll get you blood pressure first okay? (Mari kita tunggu sehari dan kau akan lebih baik. Aku akan mengukur tekanan darahmu dulu, oke?)

Patient: Yes, please and thanks. (Ya, silahkan dan terima kasih.)

3. Penugasan dan Umpan Balik

- a. Tahapan : Membentuk kelompok (5 mahasiswa)
- b. Masing-masing kelompok mengerjakan tugas sesuai dengan tema
- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

J. Kegiatan Belajar 12, 13 dan 14

1. Kemampuan Akhir yang Diharapkan

Menjelaskan Explaining disease

2. Uraian Materi

Explaining disease

Dosen: Ifa Nofalia, S.Kep.,Ns. M.Kep

In many cases, terms such as disease, disorder, morbidity, sickness and illness are used interchangeably; however, there are situations when specific terms are considered preferable.

Disease

The term disease broadly refers to any condition that impairs the normal functioning of the body. For this reason, diseases are associated with dysfunctioning of the body's normal homeostatic processes. Commonly, the term is used to refer specifically to infectious diseases, which are clinically evident diseases that result from the presence of pathogenic microbial agents, including viruses, bacteria, fungi, protozoa, multicellular organisms, and aberrant proteins known as prions. An infection or colonization that does not and will not produce clinically evident impairment of normal functioning, such as the presence of the normal bacteria and yeasts in the gut, or of a passenger virus, is not considered a disease. By contrast, an infection that is asymptomatic during its incubation period, but expected to produce symptoms later, is usually considered a disease. Non-infectious diseases are all other diseases, including most forms of cancer, heart disease, and genetic disease.

Acquired disease

An acquired disease is one that began at some point during one's lifetime, as opposed to disease that was already present at birth, which is congenital disease. Acquired sounds like it could mean "caught via contagion", but it simply means acquired sometime after birth. It also sounds like it could imply secondary disease, but acquired disease can be primary disease.

Acute disease

An acute disease is one of a short-term nature (acute); the term sometimes also connotes a fulminant nature

Chronic condition or chronic disease

A chronic disease is one that persists over time, often characterized as at least six months but may also include illnesses that are expected to last for the entirety of one's natural life.

Congenital disorder or congenital disease

A congenital disorder is one that is present at birth. It is often a genetic disease or disorder and can be inherited. It can also be the result of a vertically transmitted infection from the mother, such as HIV/AIDS.

Genetic disease

A genetic disorder or disease is caused by one or more genetic mutations. It is often inherited, but some mutations are random and de novo.

Hereditary or inherited disease

A hereditary disease is a type of genetic disease caused by genetic mutations that are hereditary (and can run in families)

Iatrogenic disease

An iatrogenic disease or condition is one that is caused by medical intervention, whether as a side effect of a treatment or as an inadvertent outcome.

Idiopathic disease

An idiopathic disease has an unknown cause or source. As medical science has advanced, many diseases with entirely unknown causes have had some aspects of their sources explained and therefore shed their idiopathic status. For example, when germs were discovered, it became known that they were a cause of infection, but particular germs and diseases had not been linked. In another example, it is known that autoimmunity is the cause of some forms of diabetes mellitus type 1, even though the particular molecular pathways by which it works are not yet understood. It is also common to know certain factors are associated with certain diseases; however, association and causality are two very different phenomena, as a third cause might be producing the disease, as well as an associated phenomenon.

Incurable disease

A disease that cannot be cured. Incurable diseases are not necessarily terminal diseases, and sometimes a disease's symptoms can be treated sufficiently for the disease to have little or no impact on quality of life.

Primary disease

A primary disease is a disease that is due to a root cause of illness, as opposed to secondary disease, which is a sequela, or complication that is caused by the primary disease. For example, a common cold is a primary disease, where rhinitis is a possible secondary disease, or sequela. A doctor must determine what primary disease, a cold or bacterial infection, is causing a patient's secondary rhinitis when deciding whether or not to prescribe antibiotics.

Secondary disease

A secondary disease is a disease that is a sequela or complication of a prior, causal disease, which is referred to as the primary disease or simply the underlying cause (root cause). For example, a bacterial infection can be primary, wherein a healthy person is exposed to a bacteria and becomes infected, or it can be secondary to a primary cause, that predisposes the body to infection. For example, a primary viral infection that weakens the immune system could lead to a secondary bacterial infection. Similarly, a primary burn that creates an open wound could provide an entry point for bacteria, and lead to a secondary bacterial infection.

Terminal disease

A terminal disease is one that is expected to have the inevitable result of death. Previously, AIDS was a terminal disease; it is now incurable, but can be managed indefinitely using medications.

Illness

The terms illness and sickness are both generally used as synonyms for disease; however, the term illness is occasionally used to refer specifically to the patient's personal experience of his or her disease. In this model, it is possible for a person to have a disease without being ill (to have an objectively definable, but asymptomatic, medical condition, such as a subclinical infection, or to have a clinically apparent physical impairment but not feel sick or distressed by it), and to be ill without being diseased (such as when a person perceives a normal experience as a medical condition, or medicalizes a non-disease situation in his or her life – for example, a person who feels unwell as a result of embarrassment, and who interprets those feelings as sickness rather than normal emotions). Symptoms of illness are often not directly the result of infection, but a collection of evolved responses – sickness behavior by the body – that helps clear infection and promote recovery. Such aspects of illness can include lethargy, depression, loss of appetite, sleepiness, hyperalgesia, and inability to concentrate.

Disorder

A disorder is a functional abnormality or disturbance. Medical disorders can be categorized into mental disorders, physical disorders, genetic disorders, emotional and behavioral disorders, and functional disorders. The term disorder is often considered more value-neutral and less stigmatizing than the terms disease or illness, and therefore is preferred terminology in some circumstances. In mental health, the term mental disorder is used as a way of acknowledging the complex interaction of biological, social, and psychological factors in psychiatric conditions; however, the term disorder is also used in many other areas of medicine, primarily to identify physical disorders that are not caused by infectious organisms, such as metabolic disorders.

Medical condition

A medical condition is a broad term that includes all diseases, lesions, disorders, or nonpathologic condition that normally receives medical treatment, such as pregnancy or childbirth. While the term medical condition generally includes mental illnesses, in some contexts the term is used specifically to denote any illness, injury, or disease except for mental illnesses. The Diagnostic and Statistical Manual of Mental Disorders (DSM), the widely used psychiatric manual that defines all mental disorders, uses the term general medical condition to refer to all diseases, illnesses, and injuries except for mental disorders. This usage is also commonly seen in the psychiatric literature. Some health insurance policies also define a medical condition as any illness, injury, or disease except for psychiatric illnesses.

As it is more value-neutral than terms like disease, the term medical condition is sometimes preferred by people with health issues that they do not consider deleterious. On the other hand, by emphasizing the medical nature of the condition, this term is sometimes rejected, such as by proponents of the autism rights movement. The term medical condition is also a synonym for medical state, in which case it describes an individual patient's current state from a medical standpoint. This usage appears in statements that describe a patient as being in critical condition, for example.

Morbidity

Morbidity (from Latin *morbidus* 'sick, unhealthy') is a diseased state, disability, or poor health due to any cause. The term may refer to the existence of any form of disease, or to the degree that the health condition affects the patient. Among severely

ill patients, the level of morbidity is often measured by ICU scoring systems. Comorbidity is the simultaneous presence of two or more medical conditions, such as schizophrenia and substance abuse.

In epidemiology and actuarial science, the term "morbidity rate" can refer to either the incidence rate, or the prevalence of a disease or medical condition. This measure of sickness is contrasted with the mortality rate of a condition, which is the proportion of people dying during a given time interval. Morbidity rates are used in actuarial professions, such as health insurance, life insurance, and long-term care insurance, to determine the correct premiums to charge to customers. Morbidity rates help insurers predict the likelihood that an insured will contract or develop any number of specified diseases.

Pathosis or pathology

Pathosis (plural pathoses) is synonymous with disease. The word pathology also has this sense, in which it is commonly used by physicians in the medical literature, although some editors prefer to reserve pathology to its other senses. Sometimes a slight connotative shade causes preference for pathology or pathosis implying "some [as yet poorly analyzed] pathophysiologic process" rather than disease implying "a specific disease entity as defined by diagnostic criteria being already met". This is hard to quantify denotatively, but it explains why cognitive synonymy is not invariable.

Syndrome

A syndrome is the association of several medical signs, symptoms, or other characteristics that often occur together, regardless of whether the cause is known. Some syndromes such as Down syndrome are known to have only one cause (an extra chromosome at birth). Others such as Parkinsonian syndrome are known to have multiple possible causes. Acute coronary syndrome, for example, is not a single disease itself but is rather the manifestation of any of several diseases including myocardial infarction secondary to coronary artery disease. In yet other syndromes, however, the cause is unknown. A familiar syndrome name often remains in use even after an underlying cause has been found or when there are a number of different possible primary causes. Examples of the first-mentioned type are that Turner syndrome and DiGeorge syndrome are still often called by the "syndrome" name despite that they can also be viewed as disease entities and not solely as sets of signs and symptoms.

Predisease

Predisease is a subclinical or prodromal vanguard of a disease. Prediabetes and prehypertension are common examples. The nosology or epistemology of predisease is contentious, though, because there is seldom a bright line differentiating a legitimate concern for subclinical/prodromal/premonitory status (on one hand) and conflict of interest–driven disease mongering or medicalization (on the other hand). Identifying legitimate predisease can result in useful preventive measures, such as motivating the person to get a healthy amount of physical exercise,[17] but labeling a healthy person with an unfounded notion of predisease can result in overtreatment, such as taking drugs that only help people with severe disease or paying for drug prescription instances whose benefit–cost ratio is minuscule (placing it in the waste category of CMS' "waste, fraud, and abuse" classification). Three requirements for the legitimacy of calling a condition a predisease are:

a truly high risk for progression to disease – for example, a pre-cancer will almost certainly turn into cancer over time

actionability for risk reduction – for example, removal of the precancerous tissue prevents it from turning into a potentially deadly cancer

benefit that outweighs the harm of any interventions taken – removing the precancerous tissue prevents cancer, and thus prevents a potential death from cancer.

Types by body system

Mental

Mental illness is a broad, generic label for a category of illnesses that may include affective or emotional instability, behavioral dysregulation, cognitive dysfunction or impairment. Specific illnesses known as mental illnesses include major depression, generalized anxiety disorders, schizophrenia, and attention deficit hyperactivity disorder, to name a few. Mental illness can be of biological (e.g., anatomical, chemical, or genetic) or psychological (e.g., trauma or conflict) origin. It can impair the affected person's ability to work or study and can harm interpersonal relationships. The term insanity is used technically as a legal term.

Organic

An organic disease is one caused by a physical or physiological change to some tissue or organ of the body. The term sometimes excludes infections. It is commonly used in contrast with mental disorders. It includes emotional and behavioral disorders if they

are due to changes to the physical structures or functioning of the body, such as after a stroke or a traumatic brain injury, but not if they are due to psychosocial issues.

Stages

"Flareup" redirects here. For the Transformers character, see Flareup (Transformers).

In an infectious disease, the incubation period is the time between infection and the appearance of symptoms. The latency period is the time between infection and the ability of the disease to spread to another person, which may precede, follow, or be simultaneous with the appearance of symptoms. Some viruses also exhibit a dormant phase, called viral latency, in which the virus hides in the body in an inactive state. For example, varicella zoster virus causes chickenpox in the acute phase; after recovery from chickenpox, the virus may remain dormant in nerve cells for many years, and later cause herpes zoster (shingles).

Acute disease

An acute disease is a short-lived disease, like the common cold.

Chronic disease

A chronic disease is one that lasts for a long time, usually at least six months. During that time, it may be constantly present, or it may go into remission and periodically relapse. A chronic disease may be stable (does not get any worse) or it may be progressive (gets worse over time). Some chronic diseases can be permanently cured. Most chronic diseases can be beneficially treated, even if they cannot be permanently cured.

Clinical disease

One that has clinical consequences; in other words, the stage of the disease that produces the characteristic signs and symptoms of that disease. AIDS is the clinical disease stage of HIV infection.

Cure

A cure is the end of a medical condition or a treatment that is very likely to end it, while remission refers to the disappearance, possibly temporarily, of symptoms. Complete remission is the best possible outcome for incurable diseases.

Flare-up

A flare-up can refer to either the recurrence of symptoms or an onset of more severe symptoms.

3. Penugasan dan Umpan Balik

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- c. Pengumpulan tugas dalam bentuk makalah dengan aturan : font 12, times new rowman, spasi 1,5, dijilid

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