

CORRECTIONS EXERCICES D'ANGLAIS
Tout savoir sur l'accident d'exposition au sang

Answers

Activity 1:

1.e 2.k 3.h 4.i 5.l 6.b 7.j 8.d 9.g 10.c 11.f 12.a

Activity 2:

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|---------------------------------|-------------------------------------|
| 1. sharps container | 2. healthcare associated infections |
| 3. accidental exposure to blood | 4. First aid kit |
| 5. blade | 6. post exposure prophylaxis |
| 7. body fluids | 8. needle stick injury |
| 9. saline | 10. PPE |
| 11. incision | 12. to squeeze |

Activity 3:

1B 2A 3A 4C 5C

Activity 4:

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|--------------------------|---------------|-------------------|------------------|
| 1 First Aid | 2. report | 3 risk reduction | 4. injuries |
| 5. sharps bins | 6. injections | 7. syringe | 8. sharps injury |
| 9. scrubbing | 10. squeeze | 11. free bleeding | 12. water-proof |
| 13. needlestick injuries | 14. antiviral | | |

Transcript:

Nurse: I'm going to go through what you should do if you've been exposed to a patient's blood. I'll explain the First Aid measures you should take and then talk about how to report the injury.

Student Nurse: Oh yes. I'm really worried about getting a serious infection if I look after patients who are very ill.

Nurse: I understand your concerns, but it's important to keep in mind the risk reduction measures I talked about earlier to avoid injuries.

Student Nurse: You mean about using sharps bins properly?

Nurse: Yes. And not re-sheathing needles after giving injections.

Student Nurse: You mean, not recapping needles?

Nurse: That's right. After giving an injection, the syringe and needle should be disposed of in the sharps bin immediately.

Student Nurse: OK. But what if I accidentally have a sharps injury?

Nurse: The first thing to remember is to follow the same procedure for all sharps injuries.

This is because you may not know whether the source of the injury carries a risk of infection

or not. If the blood is infected, you may not know the type of infection.

Student Nurse: OK.

Nurse: First, wash the site of exposure with lots of soap and water, without scrubbing the area.

Student Nurse: Should I use antiseptic wash?

Nurse: No, that's not recommended. Just liberal amounts of soap and water.

Student Nurse: Should I try to squeeze out the blood?

Nurse: No, don't squeeze out the blood or try to suck it out. Instead, allow some free bleeding of the wound. This means that you allow blood to flow out of the wound on its own.

Student Nurse: OK

Nurse: After you've cleaned the area, dry it and put on a water-proof dressing.

Student Nurse: OK. Will I need any treatment after the injury?

Nurse: It depends on the level of risk. That's why you must report any needlestick injuries so that you have access to medical advice. If the level of risk is assessed as low, you may not need any treatment. If there is a risk of exposure to hepatitis B or C or HIV, post exposure treatment may be needed. This might include vaccination against hepatitis B, taking antiviral drugs in the case of exposure to hepatitis C or PEP in the case of exposure to HIV.

Student Nurse: OK. So, the first action is to clean the area with lots of soap and water, encourage bleeding without squeezing the area, dry it and cover with a clean dressing. Then I report the injury so the level of risk for infections like hepatitis B or C or HIV can be assessed.

Nurse: That's correct. Also remember that prevention of needlestick injuries is equally important as the management of the injuries.