# ENGLISH READING COMPREHENSION PRACTICE

***For third-year students majoring in Dentistry***

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ**
**Харківський національний медичний університет**

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***For third-year students majoring in Dentistry***

# ЗАВДАННЯ ДЛЯ ДОМАШНЬОГО ЧИТАННЯ АНГЛІЙСЬКОЮ МОВОЮ

***Для здобувачів освіти третього курсу спеціальності "Стоматологія"***

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## PREFACE

A modern professional who wants to be up to date with the latest findings in his field must be able to read a large amount of specialized literature published in English. Every year, global information databases of current medical literature provide abstracts of works of leading medical journals published in English. Reading skills in a foreign language are necessary for professional development. Many sources of information require the ability to search for essential, specific information or to understand the central message of a piece of text without reading the entire thing to get the primary information (scanning, skimming, research reading). This book aims to develop reading comprehension skills in third-year students majoring in Dentistry. The textbook consists of ten chapters. Each contains scientific or popular science texts and reading comprehension exercises to develop research reading skills, reading to obtain specific information and its processing. The texts cover various topics related to the case presentations, including history, medical terminology, and description of dental disorders and conditions. Also, for the Dentistry students, working on the provided tasks needed to prepare for the English for Special Purposes exam within the KROK framework will be relevant. This manual aims to develop skills in working with professional English-language literature among dental students. We selected the texts for reading from authentic reference literature and somewhat shortened them, considering the requirements for the foreign language learning strategy. Most tasks have keys at the end of the manual, except those marked with an asterisk to encourage students to work independently. We supply the references for the sources of the texts used in the book. The language level of this textbook corresponds to work leading to level B1+. This book is recommended for third-year students majoring in Dentistry for independent work. The textbook can also be used by postgraduate students and those who wish to improve their reading skills in English.

## Unit 1

*Read the extract from the blog created for the customers of the XXX Dental Practice Center located in XXXX city:*

1._____

At XXX Dental Practice with our dentist in XXXX, we always take medical histories before dental appointments. It is an essential step that enables us to provide optimum patient care. We take medical histories, but what information do we gather, and how do we use it to create individualized treatment plans for each patient?

2._____

The information we gather from a patient's medical history can significantly impact their dental treatment. Certain medical conditions and medications can affect how we perform dental procedures or prescribe medication. For example,

patients with heart conditions might need to take antibiotics before some dental procedures to prevent infections. Patients taking blood thinners might need to stop taking them before oral surgeries to avoid excessive bleeding.

3._____

When patients come to our dentist in XXXX for the first time, we ask them to fill out a medical history form. This form asks about the patient's medical conditions, allergies, medications, and surgeries. Some patients might wonder why we need this information, especially if they only come for a routine cleaning or check-up. When patients fill out our medical history form, we ask them to provide detailed information about their medical conditions and medications. Here are some of our queries: Do you have any medical conditions? Such as diabetes, heart disease, or high blood pressure? Are you taking any medications or supplements, including over-the-counter drugs? Have you had any surgeries or hospitalizations in the past? Do you have any allergies, especially to medications or latex? Do you smoke or use any tobacco products? Are you pregnant or breastfeeding? These questions might seem extensive, but they help us understand the patient's health. We also ask follow-up questions and gather additional information during the patient's dental examination. All this information helps us create a personalised treatment plan for each patient.

4._____

Once we have gathered a patient's medical history, we use it to create a customised treatment plan. For example, if a patient has diabetes, we might recommend more frequent cleanings or periodontal treatment to prevent gum disease, which is more common in people with diabetes. If a patient takes blood thinners, we might need alternative methods to control bleeding during oral surgeries.

5. _____

Sometimes, we might need to consult with the patient's primary care physician or specialist to ensure their dental treatment is safe and effective. For example, if a patient has a heart condition, we might need to coordinate their dental treatment with their cardiologist to ensure they take the necessary precautions.

*6.* _____

Every patient is unique, and their medical history can significantly impact their dental treatment. By gathering detailed information about our patient's health, we can create personalised treatment plans that are safe and effective. We encourage all our patients to fill out their medical history forms wholly and truthfully and to ask any questions they might have about their dental treatment. With our commitment to personalised care and attention to detail, we are confident that we can help all our patients achieve the healthy, beautiful smiles they deserve.

*1. Match the paragraphs (1-6) with the subtitles (A-F), considering the order in which the information appeared in the text.*

A. Information to be gathered for the medical history;
B. Why taking history from our patient is essential for a dentist;
C. Introduction;
D. Why some consulting with primary care specialists may be necessary;
E. The role of medical histories for treatment plans;
F. Correlation of medical history and dental treatment.

*2. Answer the following questions according to the information presented in the text. Also, you may use the additional information material given in the Appendix:*

1. Why is taking a medical history necessary before a dental visit?
2. How can certain medical conditions and medications affect dental treatment? Give two examples.
3. What information does a medical history form collect from patients?
4. Why do some patients hesitate to provide a complete medical history for routine dental visits?
5. What special precautions may be necessary for patients with heart disease before specific dental procedures?
6. Why might a dentist need to consult with a patient's primary care physician or specialist?
7. How can diabetes influence a patient's dental care needs?
8. What adjustments might be made for patients taking blood thinners before oral surgery?
9. Why must patients provide truthful and complete information on their medical history forms?
10. How does gathering detailed medical history contribute to a personalized dental treatment plan?

*3. Match each medical condition, medication, or patient situation (1-10) with the corresponding dental precaution or treatment adaptation (A-J), arranging them as the text states:*

| Patient's condition or factor | Dental consideration or adaptation |
|---|---|
| 1. The patient has a heart condition | A. Use alternative methods to control bleeding before surgery. |
| 2. The patient is taking blood thinners | B. May need more frequent cleanings or periodontal treatment. |
| 3. The patient has diabetes | C. Might need to take antibiotics before certain procedures. |
| 4. The patient has latex allergy | D. Avoid latex-containing dental products. |
| 5. The patient is pregnant | E. Postpone elective procedures and avoid certain medications. |
| 6. The patient has had surgery recently | F. Inform the dentist to avoid complications with anesthesia or medications. |

| Patient's condition or factor | Dental consideration or adaptation |
|---|---|
| 7. The patient is a smoker | G. Higher risk of gum disease; advised to quit for better oral health. |
| 8. The patient had a stroke | H. Dentist may consult the patient's physician before treatment. |
| 9. The patient is on multiple medications | I. It is important to check for drug interactions with dental treatments. |
| 10. The patient has a history of excessive bleeding | J. The dentist may need to adjust techniques to minimize blood loss. |

*Get ready for your KROK and English for Specific Purposes exams.*

*4.* Read the text and write out the words you don't know. Find them in the dictionary and study them.*

A 5-year-old girl is brought to the emergency department because of fever and severe abdominal pain. Acute appendicitis is diagnosed. In the examination room, she keeps her right hip flexed and resists active extension of the hip. The inflamed structure associated with these symptoms is most likely in contact with which of the following structures?

(A) Abdominal wall and the external oblique muscle
(B) Obturator internus muscle
(C) Psoas major muscle
(D) Quadratus lumborum muscle
(E) Transversus abdominis muscle

*5.* What is the question about?*

a) cause of the disease;
b) treatment;
c) symptoms;
d) inflamed structure;
e) contact structure

*6. Do you agree or disagree with these statements? Prove your opinion.*

1. A young child was taken to the ER with signs of high temperature and sharp pain in the lower belly.
2. The patient is diagnosed with acute appendicitis.
3. During evaluation, she comfortably extends her right hip.
4. Her symptoms suggest irritation of a deep muscle that helps lift the thigh toward the body.
5. How she holds and moves her leg helps identify which internal muscle is impacted.
6. The hip position during examination helps indicate which muscle is irritated by the inflamed appendix.

*7. Solve the question asked in the test.*

## UNIT 2

*Read the text and study the words, which are not familiar to you:*

**Fluorides**

Fluoride, a natural mineral in many foods and water, helps prevent tooth decay. Fluoride prevents early tooth decay and remineralizes tooth enamel. While fluoride can be harmful in large amounts, it is difficult to reach toxic levels due to the low levels of fluoride in over-the-counter products such as toothpaste and mouthwash. When consumed in safe amounts, fluoride provides several oral health benefits. In dentistry, health professionals use this naturally occurring mineral to strengthen teeth and reduce the risk of tooth decay.

Every day, your enamel gains and loses minerals. You lose minerals when acids produced by bacteria, plaque, and sugar in your mouth attack your enamel, a process called demineralization. We consider the remineralization process when you gain minerals such as fluoride, calcium, and phosphate when you consume foods and water containing these minerals.

Tooth decay is the result of excessive demineralization without sufficient remineralization. Dental fluoride helps prevent tooth decay by making your enamel more resistant to acid attack. It also prevents early decay. When used correctly, fluoride is one of the best ways to strengthen enamel and reduce the risk of tooth decay.

*1. Are these statements true or false?*

a) Sugar, which is found in many foods, helps prevent cavities.
b) Fluoride remineralizes enamel, helps prevent early decay, and reduces the presence of bacteria.
c) Demineralization is the process of gaining minerals such as fluoride, calcium, and phosphate when you consume foods and water containing these minerals.
d) The remineralization process strengthens teeth and reduces the risk of tooth decay.

*2. Find information in the text to answer the questions:*

1. What is fluoride?
2. Which is the protective layer of a tooth?
3. What are the aggressive factors for the tooth enamel?
4. What is the process called demineralization?
5. What is the process called remineralization?
6. What can excessive demineralization without sufficient remineralization cause?

*3. Find the words to the definitions:*

… - to eat or drink something
… - to stop something from happening or someone from doing something
… - to increase in weight, speed, height, or amount
… - too much or too many

… - damage, or a state that becomes gradually worse
… - enough for a particular purpose
… - to make something more substantial or more effective, or to become more potent or more effective
… - legally sold without a prescription
… - not harmed or affected by something

*4. Write a summary of the text.*

*Get ready for your KROK and English for Specific Purposes exams.*
*5.* Read the text and write out the words you don't know. Find them in the dictionary and study them.*

A 23-year-old man with HIV infection has Pneumocystis jirovecii pneumonia. Therapy is started with trimethoprim-sulfamethoxazole, and his pneumonia resolves. The pharmacotherapy was effective because of inhibition of which of the following?
(A) Cell wall synthesis
(B) Dihydrofolate reductase
(C) Incorporation of p-aminobenzoic acid
(D) Incorporation of sterol into membranes
(E) Topoisomerase II

*6. What causes the efficiency of the treatment?*
a) reduction of pharmacotherapy;
b) enhancement of processes;
c) decomposition of substances;
d) inhibition of the key enzyme of intracellular folate metabolism

*7.* What medical condition was medication treatment prescribed for?*

*8. Solve the question asked in the test.*

**Unit 3**
*Read the text*

**Halitosis**

Bad breath affects an estimated 25 per cent of people.

It is also known as halitosis or fetor oris. There are several possible causes of halitosis, but the vast majority come down to poor oral hygiene. Halitosis can cause significant worry, embarrassment, and anxiety, but it is relatively easy to remedy.

If food particles are left in the mouth, their breakdown by bacteria produces sulfur compounds.

Keeping the mouth hydrated can reduce mouth odour.

The best treatment for bad breath is regular brushing, flossing, and hydration. Although bad breath is associated with certain diseases, oral hygiene is the most common cause.

Bad breath is a common problem that can cause significant psychological distress. There are several potential causes and treatments available.

Halitosis is the third most common reason people seek dental care after tooth decay and gum disease.

Simple home remedies and lifestyle changes, such as improved dental hygiene and quitting smoking, can often remove the issue. If bad breath persists, however, it is advisable to visit a doctor to check for underlying causes.

The best method to reduce halitosis is good oral hygiene. This ensures that cavities are avoided and reduces the likelihood of gum disease.

It is recommended that individuals visit the dentist for a check-up and cleaning twice a year. The dentist may recommend toothpaste with an antibacterial agent or mouthwash. Alternatively, if gum disease is present, professional cleaning may be necessary to clear out the build-up of bacteria in pockets between the gums and teeth. Potential causes of bad breath include tobacco, some strongly smelling food, dry mouth, poor dental hygiene, drugs, mouth, nose, and throat conditions, and diseases.

*1. Say in one word:*
Bad breath - …
Inflammation of gums - …
Pertaining to mouth - …
Very tiny organisms that are found everywhere and are the cause of many diseases - …

*2. Are these statements true or false?*
1. Bad breath is estimated to affect 1 in 4 people globally.
2. The most common cause of halitosis is bad oral hygiene.
3. Anyone can suffer from bad breath.
4. Keeping the mouth hydrated most commonly causes bad breath
5. Tobacco smoking is one of the rarer causes of bad breath.
6. Some measures to prevent halitosis are regular brushing, flossing, and hydration
7. Tooth decay and gum disease commonly cause halitosis.

*3. Continue the sentences*:
1. Better oral hygiene … .
2. Everyone is recommended to … .
3. … potentially cause halitosis.
4. Individuals need professional dental cleaning if … .
5. Dental professionals recommend toothpaste … .

*4. Write a summary of the text.*

*Get ready for your KROK and English for Specific Purposes exams.*

*5.* Read the text and write out the words you don't know. Find them in the dictionary and study them.*

A 3-year-old girl is brought to the emergency department by her father because of a persistent cough for 2 weeks. She sometimes vomits following a paroxysm of coughing. While she is not coughing, she appears well. She has not yet received any routine childhood vaccinations. Her temperature is 37°C (98.6°F). Physical examination shows petechiae over the sclera and face. Which of the following is the most likely diagnosis?
(A) Diphtheria
(B) Influenza
(C) Pertussis
(D) Plague
(E) Tularemia

*6.* What type of cough is typical for the patient described? Find all the information about the cough in this case.*

*7. Solve the question asked in the test.*

## Unit 4

*Read the text.*

**Acyclovir**

Acyclovir (brand names: Zovirax, Cymex Ultra, Virasorb) is an antiviral medicine. It treats various infections caused by herpes viruses, including cold sores, genital herpes, and eye infections. Your doctor may prescribe acyclovir to prevent you from getting these infections if you've had them before or have a weak immune system. It's also used to treat chickenpox and shingles.

Acyclovir is available on prescription. It comes as tablets, a liquid you swallow, an eye ointment, a cold sore cream and a cream for genital herpes. It's sometimes given by injection, but this is usually only done in the hospital. You can buy acyclovir cold sore cream at pharmacies and shops without a prescription. Start taking or using acyclovir when you get the first signs of infection. For most infections, you should start to feel better after taking or using acyclovir for a few days. Common side effects of the tablets and liquid include headaches, dizziness, and feeling sick. If acyclovir tablets or liquid make you feel dizzy or the eye ointment affects your vision, do not drive or cycle until you feel better. Wash your hands before and after using the genital herpes cream, cold sore cream or eye ointment.

*1. Which of the following was NOT mentioned in the text?*

1. Acyclovir treats infections caused by herpes viruses, including cold sores, genital herpes, and eye infections.
2. Acyclovir can be used to cure herpes infections permanently.
3. Acyclovir is available in different forms, including tablets, liquid, eye ointment, and cream.
4. Acyclovir can be bought without a prescription for treating all herpes infections.
5. Acyclovir is sometimes given by injection, but only in hospitals.
6. Common side effects of acyclovir include headaches, dizziness, and nausea.
7. Acyclovir should not be used while driving if it causes dizziness.
8. Acyclovir should be applied carefully to prevent contamination.
9. Acyclovir interacts with alcohol and should not be taken with alcoholic drinks.
10. Acyclovir should be taken as soon as the first signs of infection appear.

*2.* Find the explanation for the following in the text:*

Antiviral medicine
Reasons to prescribe Acyclovir
Pharmaceutical forms of Acyclovir
Ways of administration of Acyclovir
Side effects of Acyclovir

*3. Match the opposite words:*

| | |
|---|---|
| weak | not always or often |
| available | sell |
| sometimes | not able to be used or had |
| buy | last |
| first | finish |
| start | dry |
| feel better | feel worse |
| wash | not strong |

*4. Write a summary of the text.*

*Get ready for your KROK and English for Specific Purposes exams.*

*5.* Read the text and write out the words you don't know. Find them in the dictionary and study them.*

During an experimental study, an investigator finds that the regulation of cell cycle and programmed cell death may be initiated by the mitochondrion. The interaction of the mitochondrion with the activation of the caspase family of proteases and subsequent apoptosis is most likely mediated by which of the following?

(A) Calcium release
(B) cAMP production
(C) Cytochrome c release
(D) GTP binding
(E) Nitric oxide release

*6. Choose the correct descriptions (may be more than one) of what the question is testing:*
a) Result of a mediator activity
b) Interacted factors
c) Organelle-triggered pathway of cell death
d) Mechanism of apoptosis regulation
e) Mitochondrial role in initiating caspase activation

*7. Choose all possible correct descriptions that reflect what is stated in the text:*
a) A research study is being conducted on how cell functions are controlled.
b) The mitochondrion may play a role in controlling cell life and death.
c) Caspases are involved in the process of cell death.
d) The question focuses on a specific molecule that is released by mitochondria.
e) The study examines how mitochondria interact with caspase activation.

*8. Solve the question asked in the test.*

## Unit 5

*Read the text*

**Cold sores**

Cold sores are small blisters around the mouth. The herpes simplex virus causes them. The most common strain of the virus causing cold sores is herpes simplex 1. It can be spread by kissing, sharing eating utensils, or even sharing towels.

Herpes simplex is not curable. But may stay inactive for long periods of time. Once this virus is in you, it can cause outbreaks of cold sores. Cold sore outbreaks are often triggered by exposure to the sun, cold wind, a cold or other illness, a weak immune system, changing hormone levels, or stress.

Some people don't have any symptoms with the first attack. Others have flu-like symptoms and sores (ulcers) in and around the mouth. Symptoms may occur a bit differently in each person. These are the most common symptoms: tingling of the lips, commonly felt before cold sores appear; small blisters on the lips and mouth that enlarge, burst, then crust over; itching, dryness, and irritation of the lips and mouth; soreness of the lips and mouth.

Your healthcare provider can often diagnose cold sores by looking at the sores. If the diagnosis is unclear, your healthcare provider may swab the sore and send it to the lab for examination.

Cold sores can't be cured. If symptoms are severe, treatment may help ease some symptoms. Treatment works best if started as soon as the cold sore appears. Treatment may include Antiviral ointments, such as acyclovir and penciclovir, to put on the sores. These work for some people but are often not very helpful. Antiviral oral medicines, such as acyclovir, famciclovir, and valacyclovir, may decrease the time or severity of the sores. Over-the-counter pain relief medicines to put on the sores (topical) may help with symptoms. Anti-inflammatory medicines may also help.

Cold sores take about 1 to 3 weeks to heal. They can take up to 3 weeks to heal the first time they appear. But when cold sores return, they usually are less severe and take a week to heal if no medicines are used. Antiviral medicines may help, but they work best if started with early symptoms before a blister appears. Antivirals are usually not advised for otherwise healthy people.

If you have never had a cold sore, don't have skin-to-skin contact with someone with an active cold sore. If you have had a cold sore, you may prevent or reduce the number of times they return by finding out what triggers your outbreaks. Then, stay away from that trigger. For instance, if sun exposure is a trigger, use sunscreen when in the sun. If you have outbreaks often, talk with your healthcare provider. Starting treatment when you know you are getting a cold sore can help it heal faster.

The long-term use of oral antiviral medicines may prevent cold sores, but the benefit is very small. This approach is usually used only for people with frequent and painful cold sores. Antiviral medicines put on the sores don't help prevent them. Using antiviral medicine on the sores does not prevent them or help them heal faster.

*1. Supply the words to the definitions:*

… - a painful, raised area of skin with liquid inside that you get if your skin has been rubbed or burned, or a similar area on a painted surface

… - an area of skin that is red and painful because of an infection

… - a type of disease or plant

… - the time when something unpleasant and challenging to control starts, such as a war or disease

… - a sudden, short illness

… - an event or situation, etc., that causes something to start

… - set of common symptoms, including fever, shivering, chills, malaise, dry cough, loss of appetite, body aches, nausea, and sneezing typically in connection with a sudden onset of illness

… - the skin feels slightly uncomfortable

*2. Is the following true or false? Correct the false statements*

1. Cold sores are small blisters around the mouth caused by the herpes simplex virus.
2. You can be sure not to be infected by a person with a cold sore.
3. Cold sores can be spread by kissing, sharing eating utensils, or even sharing towels.
4. It is easy to cure cold sores.
5. Cold sore symptoms appear the same in all people.

*3.* Find information in the text to answer the questions:*

a) What are cold sores?
b) What causes cold sores?
c) What are the symptoms of cold sores?
d) How are cold sores diagnosed?
e) How are cold sores treated?
f) Can cold sores be prevented?

*4. Write a summary of the text.*

*Get ready for your KROK and English for Specific Purposes exams.*

*5.* Read the text and write out the words you don't know. Find them in the dictionary and study them.*

A 35-year-old woman is brought to the emergency department because of an 18-hour history of severe pain, nausea, vomiting, diarrhea, and anxiety. She was discharged with a pain medication from the hospital 2 weeks ago after treatment of multiple injuries sustained in a motor vehicle collision. She took her last dose 36 hours ago. Her temperature is 36.6 °C (97.8 °F), pulse is 105/min, respirations are 24/min, and blood pressure is 160/85 mm Hg. Physical examination shows rhinorrhea and piloerection. Bowel sounds are normal. She rates the pain as an 8 on a 10-point scale. Which of the following is the most likely diagnosis?

(A) Acute appendicitis
(B) Caffeine withdrawal
(C) Ethanol withdrawal
(D) Gastric ulcers
(E) Gastroenteritis
(F) Oxycodone withdrawal

*6.* Choose the symptoms of the patient brought with the emergency condition.*

*7.* Describe the medical history of the patient*

*8. Choose the information about the medications received by the patient.*

*9. Solve the question asked in the test.*

## Unit 6

*Read the text*

A pathologist uses monoclonal antibodies against several intermediate filament proteins and finds that a tumor section stains positive for cytokeratin only. The tumor most likely originated from which of the following tissues?
(A) Connective
(B) Epithelial
(C) Glial
(D) Muscle
(E) Nemal

*1. Read the question. What subject is it about?*

*2. Find information in text to answer the questions:*
a) What method did the pathologist use to identify the tumor's origin?
b) Which specific protein was found to be positive in the tumor section?
c) What is the purpose of using monoclonal antibodies in this examination?
d) Why is it important to identify the type of intermediate filament in a tumor?

*3. What histological specimen was used for research?*

*4. Say in one word:*
- a physician who interprets and diagnoses the changes caused by disease in tissues and body fluids
- a protective protein produced by the immune system in response to the presence of a foreign substance, called an antigen
- highly complex substance that is present in all living organisms
- A fine or slender thread, wire, or fiber
- a group of related cells that forms larger parts of animals and plants
- intermediate filament
- a mass of diseased cells that might become a lump or cause illness

*5. Are these statements true or false?*
The pathologist used monoclonal antibodies to detect intermediate filament proteins.
The tumor section stained positive for multiple types of intermediate filaments.
Monoclonal antibodies were used to study intermediate filament proteins.
The pathologist found that the tumor section stained positive for glial filaments.

## Unit 7

*Read the text*

A 54-year-old woman comes to the physician because she would like to lose weight. She has been on numerous diets in the past with limited success. Both her parents have type 2 diabetes mellitus. She is 160 cm (5 ft 3 in) tall and weighs 69 kg (152 lb); BMI is 27 kg/$m^2$ Her blood pressure is 140/90 mm Hg. Fasting serum glucose concentration is 102 mg/dL. Compared with a woman of the same age whose weight is normal, which of the following serum abnormalities is most likely in this patient?

(A) Decreased cholesterol excretion
(B) Decreased estrone concentration
(C) Decreased leptin concentration
(D) Increased fasting insulin concentration
(E) Increased growth hormone concentration
(F) Increased thyroid-stimulating hormone concentration

*1. Which purpose of these is set?*

Treatment, diagnosis, manipulation, prevention, confirmation of the diagnosis, laboratory examination, vaccination

*2. Find in the text the words indicating vital signs and anthropometric findings of the patient*

*3. Which problem is described in the text?*

- the patient has unexplained weight loss and low blood pressure.
- a high BMI and a family history of type 2 diabetes.
- the patient has a history of frequent infections and poor wound healing.
- the patient has a problem with being underweight and an eating disorder.
- the patient has type 1 diabetes and requires insulin therapy.
- the patient has normal blood pressure and no risk factors for metabolic disease.

*4. Match the words (1-7) with the definitions (a-g):*

1. Abnormality, 2. Concentration, 3. Excretion, 4. Hormone, 5. Fasting, 6. Increased, 7. Decreased

a) having become less
b) a large number or amount of something in the same place
c) something not usual or average
d) any of various chemicals in the body that are carried by the blood and that influence the body's growth and how it works
e) the process of getting rid of material such as solid waste or urine from the body
f) to become or make something larger or greater
g) a period of time when you eat no food

## Unit 8

*Read the text*

A previously healthy 16-year-old girl is brought to the physician because of abdominal cramps, bloating, and loose stools for 6 months. These symptoms began after she ingested skim milk in an attempt to lose weight. She is at the 50th percentile for height and 75th percentile for weight. Physical examination shows no abnormalities. Stool studies show a 3+ Clinitest reagent response and pH of 5. After the patient ingests milk, there is an increased hydrogen concentration in expired air. A deficiency of which of the following enzyme activities is the most likely cause of the gastrointestinal symptoms in this patient?

(A) Amylase
(B) Carboxypeptidase
(C) Fructose-1,6-bisphosphate aldolase
(D) Galactokinase
(E) Lactase
(F) Sucrase

*1. Find in the text the medical words indicating symptoms of the disease*

*2. Which system is the disorder associated with?*
*List the symptoms associated with disorders in this system*

*3. Find information in the text to answer the questions:*
a) Is the question about the time, place, cause, participant, or event?
b) What chemical substances are lacking in this disease?

*4. Which of the following was NOT mentioned in the text?*
a) The patient described is a teenage girl.
b) Her digestive issues started after she consumed low-fat milk.
c) She has had diarrhea for more than 6 months.
d) She is underweight for her age.
e) The patient attempted to lose weight.
f) She is at the 50th percentile for height.
g) Physical examination revealed abdominal tenderness.
h) Her stool pH was acidic.
i) She had no known medical problems before this began.
j) A hydrogen breath test was used in the diagnostic process.
k) The Clinitest detected reducing substances in the stool.
l) A deficiency of lactase is suspected.
m) Galactosemia was confirmed as the diagnosis.
n) Her symptoms include gas, stomach pain, and frequent loose bowel movements.
o) She started drinking more milk as part of a weight loss effort.
p) The doctor suspects she lacks the enzyme that breaks down milk sugar.

5. *Match the similar and opposite words to fill in the chart*
previously; well; shortage; unlikely; abundance; formerly; currently;
unhealthy; breathe out; loose; likely; watery; healthy; expire; ingest; inhale consume; firm; eject; deficiency; probable

| Word | Similar | Opposite |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

*6. Find the terms indicating the examinations in the text.*

## Unit 9

*Read the text.*

A 2-year-old boy with intellectual developmental disorder (mental retardation) has chewed the tips of his fingers on both hands and a portion of his lower lip. His serum uric acid concentration is increased, and he has a history of uric acid renal calculi. His 5-year-old brother has similar findings. Which of the following abnormal enzyme activities is the most likely cause of these findings?
(A) Decreased adenine phosphoribosyltransferase
(B) Decreased adenosine deaminase
(C) Decreased hypoxanthine-guanine phosphoribosyltransferase
(D) Increased phosphoribosylpyrophosphate synthetase
(E) Increased xanthine oxidase

*1. Find the words to match the definitions:*
… - looking or being almost, but not exactly
… - information or a fact that is discovered by studying something
… - positioned below one or more similar things
… - relating to the kidneys
… - relating to the mind or involving the process of thinking
… - slow development, or development that is slower than it should be
… - any of numerous complex proteins that are produced by living cells and catalyze specific biochemical reactions at body temperatures
… - the watery, transparent portion of an animal fluid

*2. Fill in the gaps with the words derived from those in the text:*

1. The disease begins when plaque on the tooth hardens to tartar, which hardens further to become calcified tartar, or … .
2. The diagnosis is … cholecystitis.
3. The symptoms had no apparent physical … .
4. Amino acids can be freed from their protein bond by cooking or by some other type of … action such as fermenting or curing.

*3. Choose the words with similar and opposite meanings and distribute them to fill in the chart:*

Different, decelerated, declined, dropped, urged, corresponding, converse, top, hindered, various, reduced, diverse, regular, speeded up, atypical, unnatural, uncommon, strange, decreased, diminished, subsided, identical, unequal, equivalent, the same, upper, bottom, delayed, slowed down, accelerated, opposite, stopped, pushed, advanced, inhibited

| **Word** | **Similar meaning** | **Opposite meaning** |
|---|---|---|
| abnormal | | |
| retarded | | |
| increased | | |
| similar | | |
| lower | | |

## Unit 10

*Recall what you remember about the structure of **English medical words** and their meanings.*

*1.* Answer the following questions to communicate about the English medical words and their meanings.*

1. What do you know about the origin of the English medical words?
2. Is it challenging to predict the meaning of the medical word CARDIOLOGY? Why?
3. What are the basic components of the word structure?
4. How many parts do we divide the word CARDIOLOGY?
5. What is the root of this word?
6. What is the suffix?
7. What do we call the component -O-?
8. Can you explain what a combining form is? Give an example.
9. What do we begin at when we analyze a medical term?
10. How can you use the knowledge once you divide the terms into their parts and learn the meaning of the individual parts? Can it help you in understanding many other new terms?
11. Compare the real meaning of the word and the meaning we receive from word structure analysis. Which one is broader?

12. What does the literary meaning help to understand?
13. Which of these definitions is based on the analysis of the word structure and meanings of the combining forms:

a) Cardiology is a medical specialty dealing with the diagnosis and treatment of diseases and abnormalities involving the heart and blood vessels;

b) Cardiology is the science about the heart?

14. Analyze the word HEMATOLOGIST. What meaning do we get if we combine the meanings of the suffix and the roots of the term?

*2. Name the tissue or part of the body described in the following terms and give the meaning of the entire term.*

| **Word** | **Tissue/body part** | **Meaning of term** |
|---|---|---|
| neuritis | | |
| rhinitis | | |
| adenoma | | |
| thrombotic | | |
| histology | | |
| dermatopathy | | |
| hemorrhage | | |
| nephrectomy | | |
| hepatomegaly | | |
| arthralgia | | |
| epigastric | | |

*3. Test your understanding of the combining forms, suffixes, and prefixes and the medical words built of them.*
*Give the meanings of the following medical word components:*

| | |
|---|---|
| -osis | |
| -logy | |
| -algia | |
| -itis | |
| -cyte | |
| -blast | |
| -ase | |
| -scopy | |
| -graphy | |
| -oma | |
| -tomy | |
| -ectomy | |
| -stomy | |
| -rrhaphy | |

| | |
|---|---|
| -plasty | |
| -emia | |
| -lysis | |
| -emesis | |
| -esthesio | |
| uria- | |
| hemo- | |
| brady- | |
| cyano- | |
| erythro- | |
| leuco- | |
| rhino- | |
| linguo- | |
| glosso- | |
| cranio- | |
| cheilo- | |
| vasculo- | |
| phlebo- | |
| adeno - | |
| cutaneo- | |
| adipo- | |
| angio- | |
| spondylo- | |
| cholecysto- | |
| mandibulo- | |
| maxilla- | |
| bucco- | |
| stomato- | |
| dento- | |
| acro- | |
| -ectasia | |
| -plegia | |
| -megaly | |
| -sclerosis | |
| -ia | |
| -ic | |
| -al | |
| bi- | |
| uni- | |
| hyper- | |
| sub- | |

| | |
|---|---|
| dys- | |
| retro- | |
| epi- | |
| peri- | |
| para- | |
| hypo- | |
| endo- | |
| a/an- | |

*4.* Based on the material from task 2, construct 10 medical words and explain their meanings according to the meanings of the combining forms.*

*5. Divide the following terms into their component parts and give the meaning for the whole term as it is done for the first word in the chart.*

| **Word** | **Structure of the word** | **Meaning of the word** |
|---|---|---|
| gasrtic | gastr/ic | pertaining to stomach |
| osteoarthritis | | |
| dermatitis | | |
| gastroenteritis | | |
| hepatitis | | |
| endocrinologist | | |
| gynecologist | | |
| pathologist | | |
| hematologist | | |
| gastroenterologist | | |
| dermatologist | | |
| nephrologist | | |
| oncologist | | |
| psychosis | | |
| hypothyroidism | | |
| hyperthyroidism | | |
| hematoma | | |
| carcinoma | | |
| sarcoma | | |
| prognosis | | |
| biopsy | | |
| autopsy | | |
| dysentery | | |
| anemia | | |
| leukemia | | |
| leukocyte | | |

| | | |
|---|---|---|
| erythrocyte | | |
| thrombocyte | | |
| laparotomy | | |
| gastroscopy | | |
| cardiovascular | | |
| cerebrovascular | | |

*6. In the following medical vignettes choose the bold term that best completes the meaning of the sentences.*

1. Selma ate a spicy meal at an Indian restaurant. Later that night she experienced **(osteoarthritis, dermatitis, gastroenteritis).** Fortunately, the cramping and diarrhea subsided by morning.
2. Christina was feeling very sluggish, both physically and mentally. Her hair seemed coarse, she had noticed weight gain in the past weeks, and she had hot and cold intolerance. Her internist ordered a blood test that revealed low levels of a hormone normally secreted from a gland in the neck. She was referred to a specialist, a/an **(gynecologist, endocrinologist, pathologist).** The physician ordered a blood test that confirmed low levels of the hormone. The diagnosis of **(hypothyroidism, hyperthyroidism, psychosis)** was thus made, and proper treatment prescribed.
3. Dr. Fischer examined the lump in Bruno's thigh. An imaging technique using magnetic waves and radio signals (MRI scan) revealed a suspicious mass in the soft connective tissue of the thigh. Suspecting a cancerous mass of flesh tissue, or **(hematoma, carcinoma, sarcoma)**, Dr. Fischer ordered a/an **(prognosis, biopsy, autopsy)** of the mass.
4. On her seventh birthday, Susie fell down during her birthday party. Her mother noticed bruises on Susie's knees and elbows that seemed to "come up overnight." Her pediatrician ordered a blood test, which demonstrated a decreased platelet count and an elevated **(leukocyte, erythrocyte, thrombocyte)** count at 40,000 cells. Susie was referred to a/an **(dermatologist, nephrologist, oncologist)**, who made a diagnosis of **(hepatitis, anemia, leukemia).**
5. When Mr. Saluto collapsed and died while eating dinner, the family requested a/an **(laparotomy, gastroscopy, autopsy)** to determine the cause of death. The **(hematologist, pathologist, gastroenterologist)** discovered that Mr. Saluto had died of a **(cardiovascular accident, dysentery, cerebrovascular accident),** otherwise known as a stroke.

*(From the Medical Terminology by D.-E. Chabner)*

## Appendix

### Unit 1

2. Additional information for the answers ex.1:

They might think it is unnecessary for minor treatments like routine cleanings or check-ups.

It collects details about medical conditions, medications, allergies, past surgeries, smoking habits, and pregnancy status.

People with diabetes are more prone to gum disease, so they may need more frequent cleanings or periodontal treatments.

Alternative methods to control bleeding might be used instead of stopping the medication completely.

Because incomplete or incorrect information can lead to complications during dental treatment.

Heart conditions might require antibiotics before procedures to prevent infections, and blood thinners might need to be paused before oral surgeries to prevent excessive bleeding.

It helps dentists provide optimal care and ensure that treatments are safe and effective.

They might need to take antibiotics to prevent infections before certain dental procedures.

It ensures that treatments are tailored to the patient's specific health needs and are carried out safely.

To ensure that the dental treatment does not interfere with the patient's existing medical conditions or medications.

## Keys

### Unit 1

*1.*

1-C. Introduction
2-F. Correlation of medical history and dental treatment
3-A. Information to be gathered for the medical history
4-E. The role of medical histories for treatment plans
5-D. Why some consulting with primary care specialists may be necessary
6-B. Why taking history from our patient is important for a dentist

*2.*

1) It helps dentists provide optimal care and ensure that treatments are safe and effective.
2) Heart conditions might require antibiotics before procedures to prevent infections, and blood thinners might need to be paused before oral surgeries to prevent excessive bleeding.
3) It collects details about medical conditions, medications, allergies, past surgeries, smoking habits, and pregnancy status.

4) They might think it is unnecessary for minor treatments like routine cleanings or check-ups.
5) They might need to take antibiotics to prevent infections before certain dental procedures.
6) To ensure that the dental treatment does not interfere with the patient's existing medical conditions or medications.
7) People with diabetes are more prone to gum disease, so they may need more frequent cleanings or periodontal treatments.
8) Alternative methods to control bleeding might be used instead of stopping the medication completely.
9) Because incomplete or incorrect information can lead to complications during dental treatment.
10) It ensures that treatments are tailored to the patient's specific health needs and are carried out safely.

*3.*
1- C;
2 – A;
3 – B;
4 – D;
5 – E;
6 – F;
7 – G;
8 – H;
9 – I;
10 - J

*6.* d

*7.* c

**Unit 2**
*1.*
a) F;
b) T;
c) F;
d) T

*2.*
1) Fluoride is a natural mineral found in many foods and water. It helps prevent tooth decay and remineralizes tooth enamel.
2) The protective layer of a tooth is enamel.
3) The aggressive factors are acids produced by bacteria, plaque, and sugar in the mouth.

4) Demineralization is the process when acids attack your enamel and minerals are lost.
5) Remineralization is when you gain minerals like fluoride, calcium, and phosphate from food and water.
6) It can cause tooth decay.

*3.*
consume; prevent; gain; excessive; decay; sufficient; strengthen; over-the-counter; resistant

*4.*
The text describes the role of fluoride, a natural mineral found in many foods and water, in maintaining oral health. Fluoride helps prevent tooth decay by strengthening tooth enamel and promoting remineralization, the process of restoring lost minerals. Tooth enamel can lose minerals through demineralization, caused by acids from bacteria, plaque, and sugar. If demineralization outweighs remineralization, tooth decay occurs. Fluoride makes enamel more resistant to acid attacks and is considered one of the most effective ways to protect teeth when used correctly.

*6.*
True – The child was brought to the ER with fever and abdominal pain.
True – The diagnosis was acute appendicitis.
False – She resists extension of the hip due to pain.
True – The psoas major is a deep muscle involved in hip flexion.
True – Her posture and movement help identify the affected muscle.
True – The flexed hip position during the exam helps pinpoint irritation of the psoas muscle.

*8.*
b

**Unit 3**
*1.*
Halitosis; Gingivitis; Oral; Bacteria

*2.*
1. T;
2. T;
3. T;
4. F;
5. F;
6. T;
7. T

*3.*
1. prevents halitosis;
2. visit the dentist for a check-up and cleaning twice a year;
3. tobacco, some strongly smelling food, dry mouth, poor dental hygiene, drugs, mouth, nose, and throat conditions, and diseases;
4. if gum disease is present;
5. with an antibacterial agent

*4.*
Bad breath, or halitosis, affects around 25% of people and is most often caused by poor oral hygiene. It can lead to embarrassment and anxiety, but is usually easy to treat with regular brushing, flossing, and staying hydrated. Other causes include tobacco use, strong-smelling foods, dry mouth, certain medications, and some diseases. Maintaining good oral hygiene is the most effective way to prevent bad breath. If the problem persists, a dentist or doctor should be consulted to check for underlying conditions. Regular dental check-ups and professional cleaning are also recommended.

*7.*
c

**Unit 4**
*1.*
2; 4; 9

*3.*

| | |
|---|---|
| weak | not strong |
| available | not able to be used or had |
| sometimes | not always or often |
| buy | sell |
| first | last |
| start | finish |
| feel better | feel worse |
| wash | dry |

*4.*
Cold sores are small blisters around the mouth caused by the herpes simplex virus. They can be spread by kissing or sharing eating utensils or even sharing towels. Tingling often happens before the blisters appear. Cold sores cause small blisters on the lips and mouth that enlarge, burst, then crust over. Early treatment can promote healing and reduce the time it takes a cold sore to heal. Using antiviral medicine on the sores does not prevent them or help them heal faster.

*6.*
c, d, e

*7.*
a; b; c; d; e

*8.*
c

**Unit 5**
*1.*
Blister; Sore; Strain; Outbreak; Attack; Trigger; Flu-like; Tingling

*2.*
T;
F;
T;
F;
F.

*4.*
Cold sores are small blisters caused by the herpes simplex virus, usually type 1. The virus is highly contagious and spreads through close contact like kissing or sharing utensils. While not curable, the virus may remain inactive for long periods. Outbreaks can be triggered by illness, stress, sun, cold wind, or hormonal changes. Symptoms include tingling, blisters, and soreness around the lips and mouth. Diagnosis is usually based on appearance, but lab tests may be used. Antiviral treatments like acyclovir can ease symptoms if started early, though they may not prevent future outbreaks. Cold sores typically heal in 1 to 3 weeks, and avoiding triggers may reduce recurrence.

*8.*
pain medication prescribed on discharge from the hospital 2 weeks ago after treatment of multiple injuries sustained in a motor vehicle collision; took her last dose 36 hours ago

*9.*
f

**Unit 6**
*1.*
histology (tissue that is the origin of the tumor)

*2.*

a) The pathologist used monoclonal antibodies against intermediate filament proteins.
b) The tumor section stained positive for cytokeratin.
c) Monoclonal antibodies help detect specific intermediate filament proteins to determine the tissue origin of a tumor.
d) Different tissues express different intermediate filaments, so identifying the filament helps determine the tumor's origin.

*3.*

a tumor section

*4.*

pathologist; antibody; protein; filament; tissue; cytokeratin; tumor

*5/*

T;
F;
T;
F

**Unit 7**

*1.*

diagnosis

*2.*

160 cm (5 ft 3 in) tall; weight 69 kg (152 lb); BMI 27 kg/$m^2$; blood pressure 140/90 mm Hg; Fasting serum glucose concentration 102 mg/dL

*3.*

a high BMI and a family history of type 2 diabetes

*4.*

decreased - having become less; concentration - a large number or amount of something in the same place;
abnormality- something not usual or average; hormone - any of various chemicals in the body that are carried by the blood and that influence the body's growth and how it works;
excretion - the process of getting rid of material such as solid waste or urine from the body;
increased - to become or make something larger or greater;
fasting - a period of time when you eat no food

**Unit 8**

*1.*

abdominal cramps, bloating, and loose stools

*2.*

digestive system; nausea, vomiting, constipation, borborygmus, spasms, cramps, bloating, abdominal pain, bleeding (hemorrhage)

*3.*

a) cause; b) enzymes

*4.*

c, d, g, m

*5.*

| Word | Similar | Opposite |
|---|---|---|
| Previously | Formerly | Currently |
| Healthy | Well | Unhealthy |
| Loose | Watery | Firm |
| Expire | Breathe out | Inhale |
| Ingest | Consume | Eject |
| Deficiency | Shortage | Abundance |
| Likely | Probable | Unlikely |

*6.*

Physical examination; Stool studies

**Unit 9**

*1.*

Similar, findings, lower, mental, renal, retardation, enzyme, serum

*2.*

1. calculus 2. calculous 3. causes 4. enzymatic

*3.*

| Word | Similar meaning | Opposite meaning |
|---|---|---|
| abnormal | atypical, unnatural, uncommon, strange, extraordinary | normal, usual, common, ordinary, natural, regular, expected |
| retarded | delayed, slowed down, decelerated, inhibited, stopped, hindered | accelerated, pushed, urged, advanced, speeded up |

| Word | Similar meaning | Opposite meaning |
|---|---|---|
| increased | enlarged, expanded, risen, progressed, amplified, intensified | decreased, reduced, declined, diminished, dropped, subsided |
| similar | corresponding, identical, equivalent, the same | different, converse, opposite, various, unequal, diverse |
| lower | bottom, inferior, minor, under, beneath, lower-grade | upper, top, higher, major, superior, primary |

**Unit 10**

*2.*

| Word | Tissue/body part | Meaning of term |
|---|---|---|
| neuritis | Nerve | Inflammation of a nerve |
| rhinitis | Nose | Inflammation of the nasal mucous membrane |
| adenoma | Gland | Benign tumor of a gland |
| thrombotic | Blood clot (thrombus) | Related to or caused by a blood clot |
| histology | Tissue | Study of tissues |
| dermatopathy | Skin | Any skin disease |
| hemorrhage | Blood | Excessive or profuse bleeding |
| nephrectomy | Kidney | Surgical removal of a kidney |
| hepatomegaly | Liver | Enlargement of the liver |
| arthralgia | Joint | Joint pain |
| epigastric | Upper abdomen/stomach | Pertaining to the area above the stomach (upper abdomen) |

*3.*

| | |
|---|---|
| -osis | condition (usually abnormal) |
| -logy | study of |
| -algia | pain |
| -itis | inflammation |
| -cyte | cell |
| -blast | immature or precursor cell |
| -ase | enzyme |
| -scopy | visual examination |
| -graphy | process of recording or imaging |
| -oma | tumor |
| -tomy | cutting, incision |
| -ectomy | surgical removal |

| | |
|---|---|
| -stomy | creation of an opening |
| -rrhaphy | surgical suturing |
| -plasty | surgical repair or reshaping |
| -emia | blood condition |
| -lysis | breakdown, destruction |
| -emesis | vomiting |
| -esthesio | sensation, feeling |
| -uria | condition of the urine |
| hemo- | blood |
| brady- | slow |
| cyano- | blue |
| erythro- | red |
| leuco- | white |
| rhino- | nose |
| linguo- | tongue |
| glosso- | tongue |
| cranio- | skull |
| cheilo- | lip |
| vasculo- | vessel (especially blood vessel) |
| phlebo- | vein |
| adeno- | gland |
| cutaneo- | skin |
| adipo- | fat |
| angio- | vessel (usually blood or lymph) |
| spondylo- | vertebra, spine |
| cholecysto- | gallbladder |
| mandibulo- | lower jaw |
| maxilla- | upper jaw |
| bucco- | cheek |
| stomato- | mouth |
| dento- | tooth |
| acro- | extremities, top |
| -ectasia | dilation or expansion |
| -plegia | paralysis |
| -megaly | enlargement |
| -sclerosis | hardening |
| -ia | condition, disease |
| -ic | pertaining to |
| -al | pertaining to |
| bi- | two |
| uni- | one |

| | |
|---|---|
| hyper- | excessive, above normal |
| sub- | under, below |
| dys- | abnormal, difficult, painful |
| retro- | behind, backward |
| epi- | upon, over |
| peri- | around |
| para- | beside, near, abnormal |
| hypo- | below, under, deficient |
| endo- | within, inner |

*5.*

| Word | Structure of the word | Meaning of the word |
|---|---|---|
| gastric | gastr/ic | pertaining to stomach |
| osteoarthritis | osteo/arthr/itis | inflammation of bone and joint |
| dermatitis | dermat/itis | inflammation of the skin |
| gastroenteritis | gastr/o/enter/itis | inflammation of the stomach and intestines |
| hepatitis | hepat/itis | inflammation of the liver |
| endocrinologist | endo/crin/o/logist | specialist in the study of hormones and glands |
| gynecologist | gynec/o/logist | specialist in the study of female disorders |
| pathologist | path/o/logist | specialist in the study of disease |
| hematologist | hemat/o/logist | specialist in the study of blood |
| gastroenterologist | gastr/o/enter/o/logist | specialist in the digestive tract |
| dermatologist | dermat/o/logist | skin specialist |
| nephrologist | nephr/o/logist | kidney specialist |
| oncologist | onc/o/logist | specialist in tumors (especially cancer) |
| psychosis | psych/osis | abnormal condition of the mind |
| hypothyroidism | hypo/thyr/oid/ism | condition of deficient thyroid activity |
| hyperthyroidism | hyper/thyr/oid/ism | condition of excessive thyroid activity |
| hematoma | hemat/oma | collection of blood (bruise) |
| carcinoma | carcin/oma | cancerous tumor |
| sarcoma | sarc/oma | malignant tumor of connective tissue |
| prognosis | pro/gnosis | prediction of the course of a disease |
| biopsy | bio/psy | viewing life (removal of tissue for diagnosis) |
| autopsy | auto/psy | viewing self (examination of a body after death) |

| | | |
|---|---|---|
| dysentery | dys/enter/y | abnormal/difficult condition of the intestines |
| anemia | an/emia | lack of blood (low red blood cell count) |
| leukemia | leuk/emia | cancer of white blood cells |
| leukocyte | leuk/o/cyte | white blood cell |
| erythrocyte | erythr/o/cyte | red blood cell |
| thrombocyte | thromb/o/cyte | clotting cell (platelet) |
| laparotomy | lapar/o/tomy | incision into the abdomen |
| gastroscopy | gastr/o/scopy | visual examination of the stomach |
| cardiovascular | cardi/o/vascul/ar | pertaining to heart and blood vessels |
| cerebrovascular | cerebr/o/vascul/ar | pertaining to brain and blood vessels |

*6.*

1. gastroenteritis
2. endocrinologist, hypothyroidism
3. sarcoma, biopsy
4. leukocyte, oncologist, leukemia
5. autopsy, pathologist, cerebrovascular accident

**Sources of the text material**


1. Davi-Ellen Chabner. Medical terminology A Short Course 6th edition, Elsevier, Saunders.
2. Medical Dictionary Mosby's Medical Dictionary. Elsevier, Mosby/Saunders.
3. Encyclopedia Britannica https://www.britannica.com/
4. Chabner, Davi-Ellen. Language of Medicine. Elsevier, Mosby/Saunders.
5. Merriam-Webster Dictionary https://www.merriam-webster.com/dictionary/ https://www.merriam-webster.com/thesaurus
6. Cambridge dictionary https://dictionary.cambridge.org/
7. The importance of taking medical histories for our dentist // https://www.meavywaydentalpractice.co.uk/blog/the-importance-of-taking-medical-histories-for-our-dentist/
8. Fluoride https://my.clevelandclinic.org/health/treatments/11195-fluoride
9. Morning breath https://www.medicalnewstoday.com/articles/morning-breath#summary

10. About Aciclovir
https://www.nhs.uk/medicines/aciclovir/about-aciclovir/
11. Cold sores. //
https://www.hopkinsmedicine.org/health/conditions-and-diseases/cold-sores
12. USMLE Step 1 Sample Items //
https://www.usmle.org/sites/default/files/2021-10/Step_1_Sample_Items.pdf
13. Biochemistry Sample Items //
https://www.nbme.org/sites/default/files/2022-01/Biochemistry_Sample_Items.pdf
14. Microbiology Sample Items //
https://www.nbme.org/sites/default/files/2022-01/Microbiology_Sample_Items.pdf
15. Histology Sample Items //
https://www.nbme.org/sites/default/files/2022-01/Histology_Sample_Items.pdf
16. Pharmacology Sample Items //
https://www.nbme.org/sites/default/files/2022-01/Pharmacology_Sample_Items.pdf
17. Gross Anatomy & Embryology Sample Items //
https://www.nbme.org/sites/default/files/2022-01/Gross_Anatomy_%26_Embryology_Sample_Items.pdf

*Навчальне видання*

# ЗАВДАННЯ ДЛЯ ДОМАШНЬОГО ЧИТАННЯ АНГЛІЙСЬКОЮ МОВОЮ

***Для здобувачів освіти третього курсу спеціальності "Стоматологія"***

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