



**Center For International Programs and Sustainability Studies**

**Name of the course: Advanced Spanish for Health Professions**

**Course code: SSP 341**

**Total number of hours: 60 hours of direct teaching**

**Number of hours of independent study: 10 hours per week**

**Requirement: SSP 241**

**Course Description:**

This course is designed for health personnel with a broad knowledge of Spanish and who need to improve their linguistic competence to interact with Spanish-speaking patients and their respective families.

This course answers the question: **How to achieve for the student to be able to communicate in a clear, fluid, structured and logical way, to achieve an effective communication with Spanish-speaking patients and their relatives?**

To answer this question the following topics will be studied:

- Imperative for usted and ustedes
- Interrogative pronouns
- Simple past tense
- Imperfect past tense
- Present perfect tense
- Present subjunctive
- Imperfect subjunctive
- Present perfect subjunctive
- Past perfect subjunctive

- Conditional sentences

The following skills will be promoted throughout the course:

- Ability to spell
- Ability to check vital signs on a patient
- Ability to describe the daily routine
- Ability to describe diets
- Ability to describe symptoms
- Ability to describe accidents
- Ability to ask about family history
- Ability to give recommendations

Some of the values and attitudes to be promoted among students are:

- Teamwork and leadership
- Systems thinking
- Logical and communicative intelligence
- Interest in solving problems
- Interest in learning to learn
- How to negotiate knowing how to inspire trust and empathy

### **Competences, criteria and evidence**

Competences for Veritas University are thoughtful and comprehensive actions that respond to the professional profile and the context's problems, with suitability and ethical commitment, integrating knowing how to be, how to do, and how to learn, within an improvement perspective. Disciplinary and general competences are presented below, linked to their criteria and performance evidence for this course.

Types of competences	Performance criteria (Sub-competences)	Performance evidences
<p><b>Disciplinary Linguistic competence</b></p> <p>Analyzes the use of language with a high degree of precision, propriety and ease to communicate with a orally and in writing with a Spanish speaking patient and his/her relatives.</p>	<p>Builds clear, fluid and well-structured discourses, with logic and efficiency</p> <p>Structures written texts with high degree of correction</p> <p>Uses a wide repertoire and lexical richness that allows to communicate in different cultural contexts</p> <p>Integrates the meaning or semantic value of words in different contexts</p>	<p>Dialogs</p> <p>Roleplay</p> <p>Illustrations</p> <p>Directed reading</p> <p>Oral presentations</p> <p>Simulations</p> <p>Simulated patient</p>
<p><b>Socio-linguistic competence</b></p> <p>Shares different ideas to convey opinions accurately and with different nuances of meaning to eliminate ambiguity.</p>	<p>Highlights markers in the formal and informal register.</p> <p>Mediates between the speaker of the target language and the community of origin, and takes into account cultural differences through popular sayings and proverbs.</p>	<p>Simulation</p> <p>Concept map</p> <p>Oral presentations</p> <p>Simulated patient</p>
<p><b>Pragmatic competence</b></p>	<p>Orders sentences to produce coherent fragments and of</p>	<p>Dialogs</p> <p>Oral presentations</p>

Uses a broad discourse competence to communicate coherently	natural sequence according to a specific situation. Elaborates brief statements of interaction through exclamatory forms Builds texts through functional use of spoken discourse or written text .	Simulated patient
<b>General</b>		
Integrates the knowledge, skills and attitudes needed to learn continuously throughout life considering effective development in the knowledge society.	Learning to learn	Directed readings Compositions
Develops the knowledge, skills and attitudes needed to learn how to communicate orally and in writing in the different discipline areas that make up the curriculum.	Communicate disciplinary thoughts in oral, iconic and written form.	Directed readings Oral presentations Simulated patient
Integrates the knowledge, skills and attitudes needed to learn teamwork and leadership techniques.	Teamwork and leadership	Directed reading Oral presentations Simulated patient
Integrates the knowledge, skills and attitudes needed to learn interpersonal communication techniques.	Relating well with others Manage and resolve conflicts. How to negotiate knowing how to inspire trust and empathy	Directed reading Oral presentations Simulated patient

	Speak responsibly In depth listening	
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## Contents

### 1. Linguistic Contents

#### 1.1. Grammatical

##### Topic 1:

- a) Imperative for usted
- b) Simple past vs. imperfect past
- c) Present perfect tense

##### Topic 2

- a) Present subjunctive
- b) Imperfect subjunctive
- c) Present perfect subjunctive
- d) Past perfect subjunctive

##### Topic 3

- a) Conditional sentences

#### 1.2. Lexical

##### Topic 4

- a) Medical vocabulary (el algodón, la ambulancia, la jeringa)
- b) Parts of the body
- c) Vocabulary related to checking vital signs (termómetro, esfigmomanómetro...)
- d) Symptoms of diseases

##### Topic 5

- a) Vocabulary related to laboratory exams
- b) Vocabulary related to tests and diagnostic studies (cardiovascular tests and respiratory studies)

- c) Types of pain
- d) Symptoms

**Topic 6**

- a) Diseases
- b) Allergies
- c) Diet
- d) Physical exercises

**Topic 7**

- a) Accident vocabulary
- b) Time expressions
- c) Medicines
- d) Childhood illnesses

**Topic 8**

- a) Surgeries
- b) Medical specialties

**1.3. Semantic****Topic 9**

- a) Formal and informal registration (usted / vos)
- b) Expressions of courtesy.

**1.4. Orthographic****Topic 10**

- a) The alphabet
- b) Vowels
- c) Consonants
- d) Punctuation marks

## 2. Socio-linguistic contents

### Topic 11

Formal and informal registration (usted / vos)

Markers for:

- a) Formal and informal presentations
- b) Formal and informal greetings
- c) Formal and informal farewells and presentations
- d) Popular sayings and expressions

## 3. Pragmatic contents

### Topic 12

#### 3.1. Discursive competition

- a) Recommendations in subjunctive
- b) Connectors

#### 3.2. Functional competence

- a) Brief statements with infinitive and imperative

## Methodology

The proposed approach is the one used by the Common European Framework (CEFR), which focuses on action insofar as it considers users and students who learn a language mainly as social agents, that is, they are members of a society that has to carry out tasks under certain circumstances, in a specific environment and within a specific field of action. This approach also takes into account cognitive, emotional and volitional resources, as well as the whole series of specific capacities that an individual applies as a social agent.

The use of language -which includes learning- includes the actions carried out by people who, as individuals and as social agents, develop a series of competences, both general and linguistic communicative competences, in particular. People use skills that are available to them in

different contexts and under different conditions and restrictions, in order to carry out language activities that involve processes to produce and receive texts related to topics in specific areas, putting into play strategies that seem most appropriate to carry out the tasks they have to perform. The control that the participants have over these produces the reinforcement or modification of their competences.

### Learning strategies

The following learning strategies will be performed:

1. Four oral presentations:
  - a) **First oral presentation, 10%.** Talk about nutrition and physical exercises to patients with heart disease, type two diabetes, arteriosclerosis, obese children. Must present a food and exercise pyramid.
  - b) **Second oral presentation, 10%.** Childhood illness, there will be a drawing explaining the symptoms, causes and recommendations for the disease to children between four and seven years of age.
  - c) **Third oral presentation, 10%.** Talk about sex education to teenagers.
  - d) **Fourth oral presentation, 10 %.** Talk about systems aimed at children of school age.
2. Two simulations: This activity will be done in pairs and will have a value of 15% each:
  - a. Simulation 1: One student will act as a doctor and another as a patient. There will be a dialog to complete the medical file with the following information:
    - Personal information
    - Weighing
    - Measuring
    - Checking blood pressure
    - Reason for consultation
    - Description of symptoms
    - Inquiry of symptoms



- Daily routine.
  - Family background
  - Laboratory exams
  - Diagnosis
  - Recommendations
  - Treatment
- b. Simulation 2: Talk and recommendations on how to act in case of emergency in the following cases:
- Electrical thunderstorm. Protecting oneself from rays
  - Poisoning by accidental or intentional overdose with drugs, analgesics, sedatives, antidepressants, or by contact with cleaning products.
  - Flood
  - Allergic reaction to bee sting, food or medicine
  - Trapped in a burning building
3. Two short compositions with a value of 5% each.
- a) Composition 1 Instructions on how to wash your hands correctly.
  - b) Composition 2 Write 10 tips for patients suffering from a disease such as: type 2 diabetes, arteriosclerosis, anemia, hypertension, hepatitis
4. Analysis of a film, 5% In order to promote a critical attitude towards diverse issues.
5. Debate, 5%, is a space dedicated to promoting speaking and research techniques on different topics. The idea is for students to choose and prepare a topic to debate and generate similar or contradictory ideas and points of view.
6. Simulated patient, 20%: This is the final activity of the course and is where students put into action everything learned in class. The simulated patient is done in pairs, one student acts as a nurse and another as a doctor and they will have to complete the identification card for the medical record of a native patient. They will have to interview the patient to collect the following information that must be written in the medical file:

#### **NURSE**

- Collection of personal data
- Checking vital signs (weigh, measurements, blood pressure)

#### **DOCTOR**

- Reason for consultation
- Description of symptoms
- Daily routine.
- Diet
- Recommendations

#### **NURSE**

- Recommendations on diet and physical exercises

### **Teaching resources**

For the good development of the course and to ensure learning, there is a collection of updated bibliographical recommendations, multimedia equipment for the individual presentations, furniture and acrylic slates for the weekly sessions, and readings supplied by the professor that can be a complement for the proposed project activities, as well as the different didactic techniques mentioned that give students a greater possibility of appropriating knowledge. Most lessons will take place in the classroom.

During independent work hours students will be able to use the institution's library, the study rooms or the computer laboratories, as well as any other areas in the university campus, since it has free access wireless Internet for all students, professors and staff.

### **Evaluation of learning**

Competence assessment is the process by which evidence is gathered and a judgment or opinion about it is formed, taking into account preset criteria to give feedback in order to improve the suitability of the course or program. Evaluation of the course, must be consistent with the competences and the teaching methodology. For each category of evaluation there is a rubric, that, although it gives a score, is a quantitative and qualitative description of the student's performance. Rubrics include performance criteria for general and disciplinary competencies.

RUBRICS	WEIGHTING
Oral presentations	40%
Simulations	20%
Compositions	10%
Simulated patient	20%
Analysis of a film	5%
Debate	5%
<b>TOTAL POINTS</b>	<b>100%</b>

### Rubric for evaluation

- Four oral presentations where the use of the three communicative competences will be promoted: linguistic, socio-linguistic and pragmatic.

	Excellent 2	Very good 1	Good 0.5	Insufficient 0
<b>Message clarity</b> Builds clear, fluid and well-structured discourses, with logic and efficiency				
<b>Fluency</b> Expresses herself spontaneously and in detail				
<b>Grammatical structures</b>				

Maintains constant grammatical mastery of a complex language level				
<b>Vocabulary management</b> Uses a broad repertoire and lexical richness				
<b>Pronunciation</b> Communicates clearly and there is no great influence of the native language				

2. Two simulations:

- a. Simulation 1, the way in which the questions are formulated and answered, the interaction with the patient and the handling and clarity of the message will be evaluated. There are two types of rubrics, one for the patient and another for the doctor.

<b>DOCTOR</b>	<b>EXCELLENT</b> <b>3</b>	<b>VERY GOOD</b> <b>2</b>	<b>GOOD</b> <b>1</b>	<b>INSUFFICIENT</b> <b>0</b>
<b>Ability to ask questions:</b> Good ability to ask questions:				
<b>Checking vital signs:</b> Uses appropriate structures for checking vital signs				
<b>Inquiry of symptoms:</b> Interrogates the patient with ease.				

<b>Recommendations</b> Gives recommendations with clear structure.				
<b>Interaction with the patient:</b> Relates to the patient with ease.				
<b>PATIENT</b>	<b>EXCELLENT</b> <b>3</b>	<b>VERY GOOD</b> <b>2</b>	<b>GOOD</b> <b>1</b>	<b>INSUFFICIENT</b> <b>0</b>
<b>Ability to answer the questions:</b> Answers in a correct and clear way the questions asked by the doctor				
<b>Description of symptoms</b> Describes well the symptoms, ailments and discomforts.				
<b>Vocabulary management</b> Masters the vocabulary.				
<b>Inquiry of the disease:</b> Asks questions for giving treatment				
<b>Interaction with the doctor:</b> Communicates easily with the doctor				

- c. Simulation 2: Talk and recommendations on how to act in case of emergency in the following cases:
- Electrical thunderstorm. Protecting oneself from rays
  - Poisoning by accidental or intentional overdose with drugs, analgesics, sedatives, antidepressants, or by contact with cleaning products.

- Flood
- Allergic reaction to bee sting, food or medicine
- Trapped in a burning building

	<b>Excellent</b> <b>2</b>	<b>Very good</b> <b>1</b>	<b>Good</b> <b>0.5</b>	<b>Insufficient</b> <b>0</b>
<b>Message clarity</b> Builds clear, fluid and well-structured discourses, with logic and efficiency				
<b>Fluency</b> Expresses herself spontaneously and in detail				
<b>Grammatical structures</b> Maintains constant grammatical mastery of a complex language level				
<b>Vocabulary management</b> Uses a broad repertoire and lexical richness				
<b>Pronunciation</b> Communicates clearly and there is no great influence of the native language				

3. Two compositions in which the appropriate use of structures, vocabulary and connectors is shown.

	<b>EXCELLENT</b> <b>1.25</b>	<b>VERY GOOD</b> <b>1</b>	<b>GOOD</b> <b>0.5</b>	<b>INSUFFICIENT</b> <b>0</b>
<b>Text structure</b> Uses complex structures, good conjugation of verbs				
<b>Clarity of the message:</b> Message is clear, logical, it can be understood.				
<b>Vocabulary management</b> Use a good repertoire of words,				
<b>Use of connectors</b> Uses a variety of connectors.				

4. Simulated patient This is the final activity of the course and is where students put into action everything learned in class. The simulated patient is done in pairs, one student acts as a nurse and another as a doctor and they will have to complete the identification card for the medical record of a native patient. They will have to interview the patient to collect the following information that must be written in the medical file:

<b>SIMULATED PATIENT</b> <b>POINTS 20%</b>	<b>GRADING</b>
<b>NURSE</b>	

<b>TOPICS FOR EVALUATION</b>	<b>EXCELLENT</b> <b>9</b>	<b>VERY GOOD</b> <b>6</b>	<b>GOOD</b> <b>3</b>	<b>INSUFFICIENT</b> <b>0</b>
<b>CLARITY OF THE MESSAGE (COHERENCE)</b>				
<b>GRAMMATICAL STRUCTURES</b>				
<b>VOCABULARY</b>				
<b>COLLECTING:</b>	<b>EXCELLENT</b> <b>6</b>	<b>VERY GOOD</b> <b>4</b>	<b>GOOD</b> <b>2</b>	<b>INSUFFICIENT</b> <b>0</b>
<i>Personal information</i>				
<i>Weigh and measure</i>				
<i>Checking blood pressure</i>				
<i>Recommendations</i>				
<i>Diet</i>				
<i>Exercises</i>				
	<b>EXCELLENT</b> <b>5</b>	<b>VERY GOOD</b> <b>3</b>	<b>GOOD</b> <b>2</b>	<b>INSUFFICIENT</b> <b>0</b>
<b>HANDLING THE SITUATION, INTERACTION WITH THE PATIENT</b>				



**COMMENTS:**

<b>SIMULATED PATIENT POINTS 20%</b>		<b>GRADING</b>		
<b>DOCTOR</b>				
<b>TOPICS FOR EVALUATION</b>	<b>EXCELLENT 9</b>	<b>VERY GOOD 6</b>	<b>GOOD 3</b>	<b>INSUFFICIENT 0</b>
<b>CLARITY OF THE MESSAGE (COHERENCE)</b>				
<b>GRAMMATICAL STRUCTURES</b>				
<b>VOCABULARY</b>				
<b>COLLECTING:</b>	<b>EXCELLENT 6</b>	<b>VERY GOOD 4</b>	<b>GOOD 2</b>	<b>INSUFFICIENT 0</b>
<i>Reason for consultation</i>				
<i>Description and inquiry of symptoms</i>				
<i>Daily routine.</i>				

<i>Diet</i>				
<i>Laboratory exams</i>				
<i>Recommendations</i>				
	<b>EXCELLENT</b> <b>5</b>	<b>VERY GOOD</b> <b>3</b>	<b>GOOD</b> <b>2</b>	<b>INSUFFICIENT</b> <b>0</b>
<b>HANDLING THE SITUATION, INTERACTION WITH THE PATIENT</b>				
<b>COMMENTS:</b>				

5. Debate on a current and controversial topic. The objective is that they express themselves clearly and can share and discuss their points of view with clarity and fluency.

	<b>Excellent</b> <b>1</b>	<b>Very good</b> <b>0.5</b>	<b>Good</b> <b>0.25</b>	<b>Insufficient</b> <b>0</b>
<b>Message clarity</b>				

Builds clear, fluid and well-structured discourses, with logic and efficiency				
<b>Fluency</b> Expresses herself spontaneously and in detail				
<b>Grammatical structures</b> Maintains constant grammatical mastery of a complex language level				
<b>Vocabulary management</b> Uses a broad repertoire and lexical richness				
<b>Pronunciation</b> Communicates clearly and there is no great influence of the native language				

6. Oral analysis of a film in order to promote a critical attitude towards diverse issues.

	<b>Excellent</b> <b>1</b>	<b>Very good</b> <b>0.5</b>	<b>Good</b> <b>0.25</b>	<b>Insufficient</b> <b>0</b>
<b>Message clarity</b> To build clear, fluid and well-structured discourses, with logic and efficiency				
<b>Fluency</b>				

Expresses herself spontaneously and in detail				
<b>Grammatical structures</b> Maintains constant grammatical mastery of a complex language level				
<b>Vocabulary management</b> Uses a broad repertoire and lexical richness				
<b>Pronunciation</b> Communicates clearly and there is no great influence of the native language				

GRADING	DESCRIPTION
<b>EXCELLENT</b> <b>(100-90%)</b>	Approaches the subject in question in a profound and concise way. Describes and identifies it clearly and fluently. Presents strategies and gives solutions if necessary, with breadth and clarity. Communicates with total certainty. Structures what is said and gets along with authority. Integrates dimensions of semantic change. Varies the intonation and places the emphasis of the sentence correctly to express subtle nuances of meaning.
<b>VERY GOOD</b> <b>(89%-80%)</b>	Approaches the subject in a good way, although less profound. Describes and identifies it. Clearly presents at least two solution strategies to the problem, as well as the justification. Expresses herself with fluidity and spontaneity, but with effort. The difficulty of the subject can hinder the natural fluidity of its expression.

<p><b>GOOD</b> <b>(79%-70%)</b></p>	<p>Approaches the problem in a good way. Presents it in a sufficient way, describes it and identifies it. Clearly presents at least one solution strategy to the problem, as well as the justification. Can communicate with a fairly uniform rhythm, but makes some long pauses and hesitates to continue communicating.</p>
<p><b>INSUFFICIENT</b> <b>(69% or less)</b></p>	<p>Approaches the subject and describes it in a limited way. Transmits with reasonable precision simple information, the linguistic repertoire is scarce. When expressing complex ideas, makes mistakes and inaccuracies. Uses a register not adapted to the communicative situation.</p>

### Attendance

Regarding classes:

1. Students are allowed only one absence. A student will fail the course if the professor records more than **one absence**. The administration does not monitor attendance.
2. Three late arrivals to class (arriving after the first 15 minutes) are treated as one absence. Arriving 30 minutes late to class without an official justification will also count as an absence.
3. In the case of an absence from any evaluated task in class (presentations, assessments, excursions, etc.), the student will receive a grade of zero unless an official document is provided within one week of the absence.
4. If a student presents an official document to justify the absence, the missed task must be completed on the same day.

### Code of conduct

Professors have the right to remove a student from the classroom if he/she/they:

1. Are disruptive in the classroom.
2. Behave in a disrespectful manner.
3. Are under the influence of alcohol.
4. Are under the influence of illegal drugs.

5. Exhibit hygiene issues or odors that may disturb other students.

### **Electronic devices**

The use of cell phones, smartphones, or other mobile communication devices is disruptive and therefore prohibited during class. Turn off all devices and put them away when class begins.

Devices may only be used when the professor assigns a specific activity and permits the use of devices for internet searches or recording. Those who do not comply with the rule must leave the classroom for the rest of the class period. Using devices while the professor or other classmates are presenting is perceived as a lack of interest and disrespect.

### **Study abroad program policies**

The student must comply with the provisions of the Study Abroad Program Policies available on the Canvas/Omnivox platform.

### **Base bibliography:**

Camacho, Milagro, Vargas Alba, 2010 *Español nivel intermedio para profesionales de salud*. Editorial Veritas.

### **Bibliography**

Berdonces, Serra Dr.J.L. *Biblioteca práctica de la salud*. Editorial Océano. España.

*Guía del conocimiento para comprender el cuerpo humano y sus funciones*. Panamericana Editorial.

Herrera, McElroy Onyria & Grabb, Lola. 2010. *Diccionario médico Español-Inglés, Inglés – Español*. Tercera edición. Lippincott Williams & Wilkins

Merck Sharpp & Dohme. *Manual Merck de información médica. Edad y Salud*. Editorial Océano. España.

### Chronogram

WEEK	SUBCOMPETENCE	CONTENT	TEACHING STRATEGIES
1	<p>Builds clear, fluid and well-structured discourses, with logic and efficiency</p> <p>Structures written texts with high degree of correction</p> <p>Uses a wide repertoire and lexical richness that allows to communicate in different cultural contexts</p>	<p><b>Grammatical</b></p> <p><b>Topic 1</b></p> <p>Formal imperative</p> <p>Simple past vs. imperfect past</p> <p>Present perfect tense</p> <p><b>Lexical</b></p> <p><b>Topic 4</b></p> <p>Medical vocabulary (el algodón, la ambulancia, la jeringa)</p> <p>Parts of the body</p> <p>Vocabulary related to checking vital signs (termómetro, esfigmomanómetro...)</p> <p>Symptoms of diseases</p> <p><b>Semantic</b></p> <p><b>Topic 9</b></p>	<p>Dialogs</p> <p>Checking vital signs:</p> <p>Roleplay</p> <p>Illustrations</p> <p>Directed reading</p>

		<p>Formal and informal registration (usted / vos)</p> <p>Expressions of courtesy.</p> <p><b>Orthographic</b></p> <p><b>Topic 10</b></p> <p>The alphabet</p> <p>Vowels</p> <p>Consonants</p> <p><b>Socio-linguistic contents</b></p> <p><b>Topic 11</b></p> <p>Formal and informal registration (usted / vos)</p> <p>Markers for:</p> <ul style="list-style-type: none"> <li>○ Formal and informal presentations</li> <li>○ Formal and informal greetings</li> <li>○ Formal and informal farewells and presentations</li> </ul>	
2	Integrates the meaning or semantic value of words in different contexts	<p><b>Grammatical</b></p> <p><b>Topic 2</b></p> <p>Present subjunctive</p> <p>Imperfect subjunctive</p> <p>Present perfect subjunctive</p> <p>Past perfect subjunctive</p> <p><b>Lexical</b></p>	<p>Dialogs</p> <p>Roleplay</p> <p>Composition 1</p> <p>Directed reading</p> <p>Oral presentations 1 and 2.</p>



		<p><b>Topic 5</b></p> <p>Vocabulary related to laboratory exams</p> <p>Vocabulary related to tests and diagnostic studies (cardiovascular tests and respiratory studies)</p> <p>Types of pain</p> <p>Symptoms</p> <p><b>Pragmatic contents</b></p> <p><b>Discursive competition</b></p> <p><b>Topic 12</b></p> <p>Recommendations in subjunctive</p> <p>Connectors</p> <p><b>Socio-linguistic contents</b></p> <p><b>Topic 11</b></p> <p>Markers Formal and informal registration: usted (-es), vos with patients</p>	Simulation 1:
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3	<p>Highlights markers in the formal and informal register.</p> <p>Mediates between the speaker of the target language and the community of origin, and takes into account cultural differences through popular sayings and social, political and other proverbs.</p>	<p><b>Grammatical</b></p> <p><b>Topic 3</b></p> <p>Conditional sentences</p> <p><b>Lexical</b></p> <p><b>Topic 6</b></p> <p>Diseases</p> <p>Allergies</p> <p>Diet</p> <p>Physical exercises</p> <p><b>Socio-linguistic contents</b></p> <p><b>Topic 11</b></p> <p>Popular sayings and expressions</p> <p><b>Pragmatic contents</b></p> <p><b>Topic 12</b></p> <p>Brief statements with infinitive and imperative</p> <p><b>Lexical</b></p> <p><b>Topic 7</b></p> <p>Accident vocabulary</p> <p>Time expressions</p> <p>Medicines</p> <p>Childhood illnesses</p>	<p>Dialogs</p> <p>Roleplay</p> <p>Illustrations</p> <p>Directed reading</p> <p>Oral presentation 3:</p> <p>Discussions</p> <p>Debate</p> <p>Composition 2</p>
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4	Builds texts through the functional use of spoken discourse or written text such as description, narration, presentation, explanation, commentary, demonstration and persuasion.	<p><b>Lexical</b></p> <p><b>Topic 8</b></p> <p>Surgeries</p> <p>Medical specialties</p> <p><b>Semantic</b></p> <p><b>Topic 9</b></p> <p>Formal and informal registration (usted / vos)</p>	<p>Dialogs</p> <p>Directed reading</p> <p>Oral presentation 4:</p> <p>Discussions</p> <p>Simulation 2:</p> <p>Simulated patient</p>
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### General observations

The student must comply with the provisions of the Student Regime Regulations of Veritas University. For reference you must go to the Student Self-Management Portal at the following address: <http://autogestion.veritas.cr/> and download.