

## **Medical - Asthma Check-Up - Haitian Creole**

INT: [Pre-Session].

CLIENT: Tell my patient that I just want to see how they are breathing this morning.

INT: May I introduce myself to your patient?

CLIENT: Yes. Go ahead, interpreter.

INT: Thank you. [Pre-Session to LEPP]. Mwen te sèlman anvi wè kijan ke ou ape respire maten an.

LEPP: Mwen genyen anpil tous ak anpil sifleman nan souf mwen.

INT: I cough a lot and I have a lot of wheezing when I breathe.

CLIENT: Have you seen a lung doctor before?

INT: Eske ou te wè avèk yon doktè poumon deja?

LEPP: Mwen pate ale.

INT: I haven't seen one.

CLIENT: We are going to have the lung doctor come and see you today but they told me you've seen someone else, so I will just have to call them to confirm. I think some of the wheezing is obviously from the asthma but there are probably other things as well. Do you take anything for acid reflux?

INT: Nou prale fè doktè poumon an vini wè ou jodia, men yo te di mwen ou te wè avèk yon lòt moun, alò mwen pral rele yo pou'm Konfime. Mwen kwè ke souf anlè a se evidaman poutèt opresyon an men ka genyen lòt bagay an plis. Eske ou pran okenn bagay pou acid la?

LEPP: Wi.

INT: Yes.

CLIENT: I think you take Pepsin, is that right?

INT: Mwen kwè ou pran Pepsin, se kòrèk?

LEPP: Wi, mwen pran Omeprazole tou.

INT: Yes, I also take Omeprazole.

CLIENT: Omeprazole? Okay. How often do you take the Omeprazole?

INT: Omeprazole ? Oke.Chak konbyen fwa ou pran Omeprazole la?

LEPP: Doktè prensipal mwen te banmwen li, youn pa jou.

INT: My PCP gave it me, one daily.

CLIENT: Okay, all right. I'm probably going to change that to two a day since you have acid reflux. I don't think that's the only reason why you are coughing but it's probably half of it and it may help.

INT: Oke, oke. Mwen genlè pral chanje sa a pou de pa jou kòm ou gen acid. Mwen pa kwè ke se pou sèl rezon sa a pouki wap touse a men sa ka mwatye epi li gendwa ede.

CLIENT: The other thing we're going to do is continue the steroids and the breathing treatment.

INT: Lòt bagay nou prale fè a se kontinye steroyid yo avèk tretman respirasyon an.

LEPP: Dakò.

INT: That's fine.

CLIENT: I'm going to take a quick listen to her lungs and then I'm going to make these changes. Do you have any other questions?

INT: Mwen prale kouri fè yon ti tande poumon li epi apres a mwen prale fè chanjman sa yo, eske ou genyen okenn lòt kesyon?

LEPP: Sa ki nui mwen se touse an, tankou se yon bagay kap satouyèt mwen, li nui mwen epi mwen vin gen yon gwo tous.

INT: What bothers me is the coughing, it's as if I have something tickling me. It bothers me and then I get a strong cough.

CLIENT: I think part of it is acid reflux, part of it is allergy, and part of it is asthma and we are going to treat all of it.

INT: Mwen kwè ke acid la se yon pati, alèji a se yon pati, epi yon lòt pati se opresyon an epi nou prale trete yo tout.

LEPP: Dakò.

INT: That's fine.

CLIENT: And I will add something for the cough to see if it helps. Anything else?

INT: Epi mwen prale ajoute yon bagay pou tous lan pou mwen wè si la ka ede ou. Okenn lòt bagay?

LEPP: Non, mwen bon, mèsi.

INT: No, that's fine. Thank you.

CLIENT: Okay. That's all, interpreter.

INT: [Post-Session].

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