


# Gray Areas:

Decision Making in the  
Field

# Interpreting is a “practice profession”

- \* The Standards are guidelines, not laws, describing our role in most (not all) cases.
- \* We need to know the reasons for the guidelines, so we understand the intent
- \* In challenging situations the intent is often more useful than the “letter of the law”.



Today we will discuss some of the “gray areas” that may have more than one correct response, and consider the edges of our role boundaries.

# Scenario 1

- \*M.D.: “What can I do for you?”
- \*Pt.: “I have a problem with my kidneys.”

M.D.: “What can I do for you?”

\*Pt.: “I have a problem with my kidneys.”

\* (hidden announcer voice: What the doctor may not know is that many people from the patient’s country often call any kind of low-back-pain “kidney” pain. What should the interpreter do? If anything?)

# IN GROUPS:

given this scenario discuss:

- \* How many different options does the interpreter have?  
(What is the range of actions?)
- \* When would the interpreter choose each action?
- \* Support with related Standard of Practice

# Cross cultural Communication

- \*What we know we know
- \*What we know we don't know
- \*What we don't know we don't know....

**What  
we  
know**

**What we know  
we don't know**

**What we don't know  
that we don't know**

Slide by  
Kalen Beck



Sometimes the  
interpreter knows...

... the patient and provider  
don't know they do not  
understand each other

# Scenarios

\* 2

Compare and contrast  
two situations

# OB GYN appointment is ending

- \* M.D.: Very good then; why don't you come back in a year?
- \* Pt.: (directly to the interpreter) Well actually I have a problem, it's...mm, well, when I'm with my husband ...well, it kind of hurts.

The MD left; you are walking  
the patient to check out.

\*Patient: “My son has active  
TB, but don’t tell the doctor”

# Discuss In Groups

- \* Why do some people address the interpreter directly?
- \* How can interpreters encourage people to address each other directly?
- \* How are the two situations different? Similar?
- \* What would you do in each case? Why?

# Scenario

\* 3

Compare and Contrast

## Compare two inpatient scenarios

The interpreter regularly interprets for a patient who is being treated for cancer and often says he doesn't want his family to know he has cancer.

The interpreter is called to an inpatient floor, and joins the resident to go talk to this patient.

Several visitors are around the bed. The doctor says, "We would like to talk to you about your test results." Patient looks uncomfortable but only nods. The Resident tells him his Cancer is worse. The visitors look shocked.

# Compare two inpatient scenarios

Neither interpreter nor MD have ever met the patient before.

The interpreter is called to an inpatient floor, and joins the resident to talk to this patient. Several visitors are around the bed. The doctor says, “We would like to talk to you about your test results.” Patient looks like slightly uncomfortable but only nods. The Resident tells him his Cancer is worse. The visitors look shocked.



# In Groups

- \* Is there a problem? What is it?
- \* What is the difference between the two scenarios?
- \* Should the interpreter have done something? What?
- \* What standards relate to this?

# Scenario

\* 4

Register

Understanding

# Understanding vs. register

- \* Word Choice. Sometimes the most accurate word is not understood by the patient.  
e.g. Hysterosalpingography is high register.
- \* Do you or your patients ever give the English word? MRI, Cat scan, Pap smear, pacemaker, ...?

# Understanding vs. register

What should the interpreter do if the doctor uses a common medical term but you suspect the patient won't understand it.

Examples: “pap smear”, “polyp”, “colonoscopy” ...

# In Groups:

How can the interpreter balance

- \* **A-3 Maintain the linguistic register and style of the speaker.**
- \* **A-9 Ensure that the interpreter understands the message?**
- \* **Can do both at once? How?**

The end