General Patient Information

by Sophia Tutorial

WHAT'S COVERED

In this lesson, you will learn how to ask patients for some basic information after you have introduced yourself to them. Specifically, this lesson will cover:

1. Datos del Paciente (Patient Information)

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The following chart provides you with language you can use to ask patients some general questions about themselves before you discuss their primary health concerns.

English	Spanish	Pronunciation
What is your full name?	¿Cuál es su nombre completo?	k'wall ace sue **noam**-bray comb-**play**-toe
What is your/ his/her phone number?	¿Cuál es su número de teléfono?	k'wall ace sue **noo**-may-row day tay-**lay**-fo-no
What is your/his/her address?	¿Cuál es su dirección?	k'wall ace sue dee-rake-see-**own**
What is your date of birth?	¿Cuál es su fecha de nacimiento?	**k'wall** ace sue **fay**-chah day nah-see-me-**ain**-toe
How old are you?	¿Qué edad tiene usted? / ¿Cuántos años tiene?	kay ay-**dodd** tee-**ay**-nay / **k'wahn**-tohs **ahn**-yohs tee-**ay**-nay
I am _____ years old.	Tengo _____ años.	*This is a patient response.*
Who is your doctor?	¿Quién es su médico/a?	key-**ain** ace sue **may**-dee-koh/kah
Who is your primary care physician?	¿Quién es su médico de atención primaria?	key-**ain** ace sue **may**-dee-koh day ah-tain-see-**own** pre-**mah**-ree-ah
In case of an emergency, who should we contact?	En caso de una emergencia, ¿a quién debemos contactar?	ain **kah**-so day **oo**-nah ay-mair-**hane**-see-ah ah key-**ain** day-**bay**-mohs cone-tahk-**tar**
What is your legal sex?	¿Cuál es su sexo según la ley?	k'wall ace sue **sake**-so say-**goon** la lay
female	femenino	*This is a patient response.*
male	masculino	*This is a patient response.*
non-binary	ni femenino, ni masculino	*This is a patient response.*
other	otro/a	*This is a patient response.*

Prefer not to answer.	Prefiero no responder.	This is a patient response.
What is your gender identity?	¿Con qué género se identifica?	cone kay **hay**-nay-row say ee-dain-tee-**fee**-kah
female	femenino	*This is a patient response.*
male	masculino	*This is a patient response.*
other	otro/a	*This is a patient response.*
Prefer not to answer.	Prefiero no responder.	*This is a patient response.*
transgender female	transgénero femenino	*This is a patient response.*
transgender male	transgénero masculino	*This is a patient response.*
What was your sex at birth?	¿Cuál fue su sexo al nacer?	k'wall f'way sue **sake**-so all nah-**sair**
female	femenino	*This is a patient response.*
male	masculino	*This is a patient response.*
Prefer not to answer.	Prefiero no responder.	*This is a patient response.*
What is your sexual orientation?	¿Cuál es su orientación sexual?	k'wall ace sue oh-ree-ain-tah-see-**own** sake-sue-**all**
straight	heterosexual	*This is a patient response.*
lesbian / gay	lesbiana / homosexual	*This is a patient response.*
bisexual	bisexual	*This is a patient response.*
other	otro/a	*This is a patient response.*
Prefer not to answer.	Prefiero no responder.	*This is a patient response.*
What is your driver's license number?	¿Cuál es su número de licencia de manejo?	k'wall ace sue **noo**-may-row day lee-**sain**-see-ah day mah-**nay**-ho
May I see your driver's license?	¿Puedo ver su licencia de manejo?	**p'way**-doe bare sue lee-**sain**-see-ah day mah-**nay**-ho
Are you Hispanic?	¿Es usted Hispano/a?	ace oo-**staid** ee-**spah**-no / nah
What is your race?	¿Cuál es su raza?	k'wall ace sue **rah**-sah
American Indian	aborigen de América del Norte / nativo/a americano/a / nativo de América del Norte	*This is a patient response.*
Alaskan Native	aborigen de Alaska / nativo/a de Alaska	*This is a patient response.*
Black / African American	negro / afroamericano	*This is a patient response.*
Hispanic	hispano/a	*This is a patient response.*
Native Hawaiian	nativo/a de Hawái	*This is a patient response.*
Pacific Islander	nativo/a de las islas del Pacífico / nativo/a de la Polinesia	*This is a patient response.*
other	otro/a	*This is a patient response.*
White / Caucasian	blanco/a / caucásico/a	*This is a patient response.*

Prefer not to answer.	Prefiero no responder.	*This is a patient response.*
What is your ethnic group?	¿Cuál es su grupo étnico?	k'wall ace sue **groo**-po **ate**-knee-koh
not Hispanic or Latino	no hispano o latino	*This is a patient response.*
Hispanic	hispano	*This is a patient response.*
Latino	latino	*This is a patient response.*
Prefer not to answer.	Prefiero no responder.	*This is a patient response.*
I don't know. (unknown)	No sé.	*This is a patient response.*
What is your preferred language?	¿Qué idioma prefiere? / ¿Cuál es su idioma preferido?	kay ee-dee-**oh**-mah pray-fee-**ay**-ray / k'wall ace sue ee-dee-**oh**-mah pray-fair-**ee**-doe
English	inglés	*This is a patient response.*
Spanish	español	*This is a patient response.*
What is your marital status?	¿Cuál es su estado civil?	k'wall ace sue ay-**stah**-doe see-**beel**
single	soltero/a	*This is a patient response.*
married	casado/a	*This is a patient response.*
separated	separado/a	*This is a patient response.*
divorced	divorciado/a	*This is a patient response.*
widowed	viudo/a	*This is a patient response.*
Do you have any special needs?	¿Tiene una necesidad especial?	tee-**ay**-nay **oo**-nah nay-say-see-**dod** ace-pay-see-**all**
I have a developmental delay.	Tengo un retraso en el desarrollo.	*This is a patient response.*
culture: food / fluid consideration	cultura: consideración de comida/fluidos	*This is a patient response.*
I am on a restricted diet.	Tengo una dieta limitada.	*This is a patient response.*
I am fasting.	Estoy de ayuno.	*This is a patient response.*
I am allergic to…	Soy alérgico/a a…	*This is a patient response.*
I am lactose intolerant.	Sufro de intolerancia a la lactosa.	*This is a patient response.*
I don't eat…	No como…	*This is a patient response.*
I'm vegetarian.	Soy vegetariano/a.	*This is a patient response.*
I'm vegan.	Soy vegano/a.	*This is a patient response.*
I'm hearing impaired.	Tengo problemas de la audición.	*This is a patient response.*
I'm mobility impaired.	Tengo discapacidades físicas.	*This is a patient response.*
I use a cane.	Utilizo un bastón.	*This is a patient response.*
I use a walker.	Utilizo un andador ortopédico.	*This is a patient response.*
I use a wheelchair.	Utilizo una silla de ruedas.	*This is a patient response.*
I'm vision impaired.	Tengo problemas de la visión.	*This is a patient response.*

What is your preferred style of learning?	¿Qué método de aprendizaje prefiere?	kay **may**-toe-doe day ah-prain-dee-**sah**-hay pray-fee-**ay**-ray
reading	la lectura	*This is a patient response.*
writing	la escritura	*This is a patient response.*
demonstration	la demostración	*This is a patient response.*
What is your religious preference?	¿Cuál es su preferencia religiosa?	k'wall ace sue pray-fay-**rain**-see-ah ray-lee-he-**oh**-sah
Christian	Cristiano/a	*This is a patient response.*
Catholic	Católico/a	*This is a patient response.*
Protestant (Baptist, Methodist, Lutheran, Presbyterian)	Protestante (Bautista, Metodista, Luterana, Presbiteriana)	*This is a patient response.*
Mormon/LDS	Mormón/Santos de los últimos Días	*This is a patient response.*
Jewish	Judío	*This is a patient response.*
Muslim	Musulmán	*This is a patient response.*
Buddhist	Budista	*This is a patient response.*
Hindu	Hindú	*This is a patient response.*
No preference.	Sin preferencia.	*This is a patient response.*
Do you have access to e-mail?	¿Tiene acceso al correo electrónico?	tee-**ay**-nay ahk-**say**-so all koh-**ray**-oh ay-lake-**troh**-knee-koh
What is your e-mail address?	¿Cuál es su dirección de correo electrónico?	k'wall ace sue dee-rake-see-**own** de koh-**ray**-oh ay-lake-**troh**-knee-koh
Write it down, please.	Escríbalo, por favor.	ace-**kree**-bah-lo pour fah-**bore**
Have you had a tetanus, flu, or pneumonia shot in the last five years?	¿Ha sido vacunado en contra del tétano, influenza, o neumonía en los últimos cinco años?	ah **see**-do bah-koo-**nah**-doe ain **cone**-trah dale **tay**-tah-no een-flu-**ain**-sah oh nay-oo-moh-**nee**-ah ain lohs **ool**-tee-mohs **seen**-koh **ahn**-yohs
Are you up to date with immunizations?	¿Está al día con todas sus inmunizaciones?	ace-**tah** all **dee**-ah cone **toe**-dahs suess een-moo-nee-sah-see-**oh**-nace
What is your blood type?	¿Cuál es su tipo de sangre?	k'wall ace sue **tee**-po day **sahn**-gray
A-	A negativo	*This is a patient response.*
A+	A positivo	*This is a patient response.*
B-	B negativo	*This is a patient response.*
B+	B positivo	*This is a patient response.*
AB-	AB negativo	*This is a patient response.*
AB+	AB positivo	*This is a patient response.*
O-	O negativo	*This is a patient response.*
O+	O positivo	*This is a patient response.*

I don't know.	No sé.	*This is a patient response.*
How much do you weigh?	¿Cuánto pesa?	**k'wahn**-toe **pay**-sah
_____ pounds	_____ libras	*This is a patient response.*
_____ kilograms	_____ kilogramos	*This is a patient response.*
_____ grams	_____ gramos	*This is a patient response.*
How tall are you?	¿Cuál es su altura?	**k'wall** ace sue all-**too**-rah
_____ feet _____ inches	_____ pies _____ pulgadas	*This is a patient response.*
_____ centimeters	_____ centímetros	*This is a patient response.*
What previous surgeries have you had?	¿Qué cirugías ha tenido?	kay see-roo-**he**-ahs ah tay-**knee**-doh
Have you had any recent unexplained weight loss?	¿Ha perdido recientemente de peso de manera inexplicable?	ah pair-**dee**-doe ray-see-ain-tay-**main**-tay day **pay**-so day mah-**nay**-rah een-ace-plee-**kah**-blay
Have you had any recent unexplained weight gain?	¿Ha ganado recientemente de peso de manera inexplicable?	ah gah-**nah**-doe ray-see-ain-tay-**main**-tay day **pay**-so day mah-**nay**-rah een-ace-plee-**kah**-blay
What is your job?	¿En qué trabaja?	ain kay trah-**bah**-ha
agriculture, forestry, fishing, and hunting	agricultura, selvicultura, pesca, y caza	*This is a patient response.*
mining, quarrying, and oil and gas extraction	minería, canteras y extracción de petróleo y gas	*This is a patient response.*
utilities	servicios públicos	*This is a patient response.*
construction	construcción	*This is a patient response.*
manufacturing	fabricación	*This is a patient response.*
wholesale trade	comercio al por mayor	*This is a patient response.*
retail trade	comercio al por menor	*This is a patient response.*
transportation and warehousing	transporte y almacenamiento	*This is a patient response.*
information	información	*This is a patient response.*
finance and insurance	finanzas y seguros	*This is a patient response.*
real estate and rental and leasing	bienes raíces y renta y alquiler	*This is a patient response.*
professional, scientific, and technical services	profesional, científico, y servicios técnicos	*This is a patient response.*
management of companies and enterprises	administración de compañías y empresas	*This is a patient response.*
administrative and support and waste management and remediation services	administración y apoyo de la gerencia de desechos y servicios de remediación	*This is a patient response.*
educational services	servicios educativos	*This is a patient response.*

healthcare and social assistance	cuidado de la salud y asistencia social	*This is a patient response.*
arts, entertainment, and recreation	artes, entretenimiento y recreación	*This is a patient response.*
accommodation and food services	servicios de acomodación y alimentos	*This is a patient response.*
public administration	administración pública	*This is a patient response.*
other services (except public administration)	otros servicios (excepto administración pública)	*This is a patient response.*
full-time / part-time student	estudiante de tiempo completo / parcial	*This is a patient response.*
Have you had a colonoscopy?	¿Ha tenido una colonoscopia?	ah tay-**knee**-do **oo**-nah koh-lo-no-**skoh**-pee-ah
When was your last colonoscopy?	¿Cuándo se le hizo la última colonoscopia?	**k'wahn**-doe say lay **ee**-so la **ool**-tee-mah koh-lo-no-**skoh**-pee-ah
Do your gums bleed?	¿Sus encías sangran?	suess ain-**see**-ahs **sahn**-grahn
Do you have any loose or broken teeth?	¿Tiene dientes flojos o rotos?	tee-**ay**-nay dee-**ain**-tace **floh**-hohs oh **row**-tohs
Do you wear hearing aids?	¿Usa audífonos para poder oír?	**oo**-sah ow-**dee**-fo-nohs **pah**-rah po-**dair** oh-**ear**
How many people live in your household?	¿Cuántas personas viven en su casa?	**k'wahn**-tahs pair-**so**-nahs **bee**-bain ain sue **kah**-sah
How old are the children who live with you?	¿Qué edad tienen los niños que viven con usted?	kay ay-**dodd** tee-**ay**-nain lohs **knee**-yohs kay **bee**-bain cone oo-**staid**
When was the last time you had something to eat or drink?	¿Cuándo fue la última vez que tuvo algo de comer o beber?	**k'wahn**-doe f'way la **ool**-tee-mah bace kay **too**-bow **all**-go day koh-**mair** oh bay-**bare**
A few hours ago.	Hace algunas horas.	*This is a patient response.*
Yesterday.	Ayer.	*This is a patient response.*
I don't remember.	No me acuerdo.	*This is a patient response.*
This morning.	Esta mañana.	*This is a patient response.*
Last night.	Anoche.	*This is a patient response.*
Have you had a fever?	¿Ha tenido una fiebre?	ah tay-**knee**-doe **oo**-nah fee-**ay**-bray
Have you had any diarrhea?	¿Ha tenido diarrea?	ah tay-**knee**-doe dee-ah-**ray**-ah
Do you wear oxygen at home?	¿Usa oxígeno en su casa?	**oo**-sah oak-**see**-hay-no ain sue **kah**-sah

SUMMARY

In this lesson, you learned some useful questions that you can use to gather basic **patient information** in Spanish. This language is important because it will help you gain some necessary background knowledge about your patients before you discuss their primary health concerns.

¡Buena suerte!

Support

If you are struggling with a concept or terminology in the course, you may contact **SpanishforNursesSupport@capella.edu** for assistance.

If you are having technical issues, please contact **learningcoach@sophia.org**.

Source: This content has been adapted from "Spanish for Nurses" by Stephanie Langston.