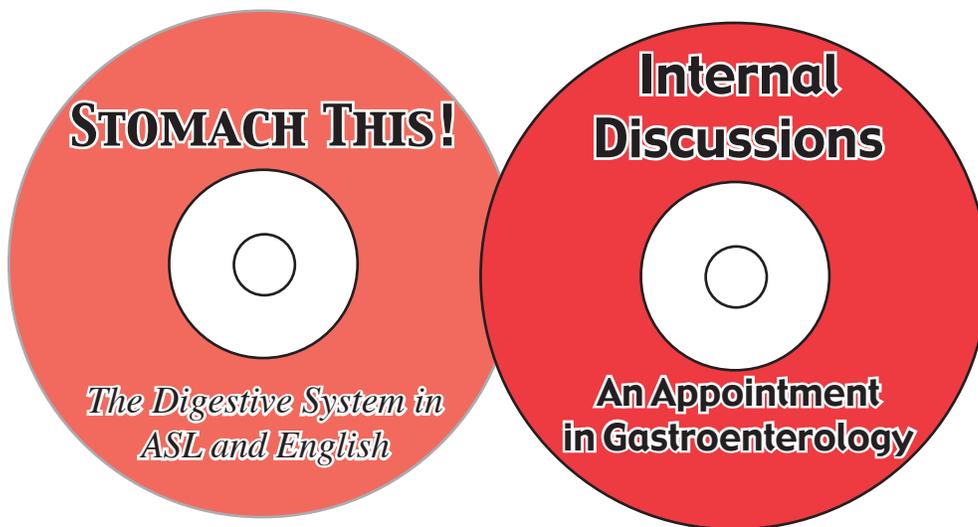


**AN INDEPENDENT STUDY PACKET FOR WORKING WITH THE DIGESTIVE SYSTEM**

using two CD-ROMs



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for the

**COLLEGE OF ST. CATHERINE**  
in partnership with  
**SLICES, LLC.**

RSA Region V ITP Award #H160A000008

*Worth up to 2.0 CEUs as an Independent Study for RID's CMP/ACET Program.*

FOR MORE INFORMATION, AND UPDATED VERSIONS OF THIS PACKET, VISIT:

*[www.stkate.edu/project](http://www.stkate.edu/project).*

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## Study Packet Overview

This Independent Study Packet is designed to accompany two CD-ROMs created by the RSA Region V Interpreter Education Project. The first is “**STOMACH THIS!**: *The Digestive System in ASL and English.*” The second is: “**Internal Discussions: An Appointment in Gastroenterology.**” The purpose of the packet is to provide a systematic process for learning about the anatomy and physiology of the digestive system in both English and ASL, and then incorporating that understanding in interpreting for medical appointments requiring such knowledge.

## Study Packet Objectives

Through completing the activities in the study packet, users will be able to:

- Install necessary software and navigate CD-ROMs containing digital video and links to internet resources
- Analyze linguistic features in an English and ASL lecture on the digestive system
- Describe the structure and functions of the digestive system in English and ASL
- Identify resources for further research on anatomy, physiology, and medical issues related to the digestive system
- Handle checking in for a medical appointment in an efficient manner
- Identify sociolinguistic features in an interpreted interaction
- Interpret for an interactive appointment in gastroenterology in both a consecutive and simultaneous format
- Interpret spoken English presentation on procedures used in gastroenterology in both a consecutive and simultaneous format.

## Required Materials (Resources and Media)

### Computer & Printer

Required for playing CD-ROMs, printing out diagrams, and accessing resources on the internet.

### Videocamera

Required for videotaping assignments for use in self-assessment and analysis.

### Internet Access

Access is required only to access websites related to the digestive system. No video playing is required, so a high speed connection to the internet is not necessary.

### Two CD-ROMs:

1. **STOMACH THIS!**: *The Digestive System in ASL and English.*
2. **Internal Discussions: An Appointment in Gastroenterology.**

These two CDs provide applications of knowledge regarding the digestive system in academic and clinical settings. **STOMACH THIS!** has parallel lectures on the Digestive system which might occur in both high school and college settings. **Internal Discussions** has situations which would occur in appointments at a Gastroenterology Department in a health clinic. If you need these CDs, you can visit: [www.stkate.edu/project](http://www.stkate.edu/project) or [www.digiterp.com/NESC.html](http://www.digiterp.com/NESC.html) for ordering information. Each CD costs only \$10 and has an educational copyright, meaning that it can be copied and shared provided it is not sold for a profit.

## Getting CEUs for this Independent Study

Using this packet, you can complete an Independent Study which is worth up to 2.0 CEUs for RID’s CMP/ACET Program. To do so, you need to contact an Approved Sponsor prior to starting your work and submit an Independent Study Plan. A sample plan is included in Appendix D. (You only need to add your name and contact information.) You can visit [www.rid.org/cmppsp.html](http://www.rid.org/cmppsp.html) to find an approved sponsor.

## Pedagogical Framework for an Independent Study

This study packet is designed to be used in a variety of settings. It may be used by an individual, in a study group, in a mentoring relationship, or an academic classroom. Each application may require some modification to be most effective in a given situation.

In a broad sense, the format of this study packet draws on the ideas of Lev Vygotsky, a Russian psychologist whose work is having significant influence on approaches in interpreter education. With the risk of oversimplifying, one aspect of Vygotsky's ideas is that learning is a mediated and social process. That is, learning takes place in relationship with others. Moreover, Vygotsky suggests that developmentally, learning takes place in three steps:

- 1: Working with object:*
- 2: Working with other; and*
- 3: Working with self.*

### Step 1: Working with Object

This step involves significant struggle. A learner needs to engage with the activity, in this case, interpreting in situations involving the digestive system. While learners may be challenged beyond a place where they are able to feel success, that is not what is intended. Instead, this study packet hopes to set up what Vygotsky terms a Zone of Proximal Development, that is, an area where you can struggle with new material, but where you also have enough support so that learning, and not frustration, results from the struggle. This process of struggling with “the object” gives learners the experience to make their work with others meaningful. To be specific, as you approach working with these situations related to the digestive system, it may be tempting to start off just watching interpretations. To see how “the expert” does it. However, the process of creating an interpretation first gives you needed experience which allows you to observe the model interpretation in new ways. In many ways, this personal experience “plows the field” of your mind, by identifying areas to focus on in your work and preparing you for learning new approaches.

### Step 2: Working with Other

This step focuses on learning being a mediated process that happens in relationship with another. Whether a teacher, mentor, or colleague, people often fill this role of mediating learning. It's critical to recognize that the learning happens because of the student's activity. That is, the learner is actively engaged in determining what needs to be learned. After a learner has struggled with something, and has the desire to improve, through a relationship with some outside person or resource that can help them address identified deficiencies, they are able to move forward with their understanding. In the case of this Independent Study, the other is a set of CD-ROMs focused on the digestive system and this study packet. The CDs have model presentations in English and ASL, sample interpretations, and other resources you can use to develop your knowledge and linguistic capacity. The study packet, hopefully, will give you concrete ideas and strategies for how you can move forward in your interpreting work.

## Step 3: Working with Self

After getting the support of other people and resources, it is time to apply it in your own work--which is the true test of how much you have learned. Within this framework, there are opportunities for you to interpret texts simultaneously. Before you get to that point, there will be a significant number of supports in place to build your understanding of the digestive system and strategies for interpreting in these types of settings. Of course, the true test really comes when you are called to interpret an actual appointment in gastroenterology or in a classroom dealing with Anatomy and Physiology. The RSA Region V Project's hope is that this process will have a significant impact on your actual work.

## Applying this with Interpreting Interaction

**Internal Discussions** is designed in a format applying this Vygotskian framework. Each interaction comes in three forms: the first is formatted for consecutive interpreting; the second shows a model interpretation, and the third is formatted for simultaneous interpreting. Working consecutively is an opportunity for you to work in a controlled way with the situation (without having access to all of the dynamics of the interaction because you were not present at the filming and you cannot see the interpretation.) This equates to the first step of "Working with Object." It gives you the chance to find out what challenges you face in working with the text.

Knowing these challenges, you are more prepared for moving on to "Working with the Other," which equates to observing a model interpretation. Finally, you can attempt to apply your learning by interpreting in a simultaneous format. This represents the step of "Working with Self," though it happens in a setting with which you are familiar and have rehearsed. Hopefully, this format, when you actually get out on your own, will prove to be beneficial in your interpreting work.

In the Lessons focused on Observation of Interpretations, one of the frameworks I suggest is listed as Vygotskian. What I mean by this is that you use the experience of your interpreting in a consecutive format as the first step in Vygotsky's progression of Working with Object, Other, and Self. Drawing on your experiences of what was salient, that is what stood out for you in interpreting the situation, you can focus your observation to see how another interpreter managed those parts of the interaction. In this way, you are actively involved in determining what it is you want/need to learn--and then work with the sample interpretations in ways that move you further down your path to the interpreter you are working to become.

## Lesson 1: Getting Started—Understanding the Technology

**Objective:** *In this lesson, you will install necessary software and navigate CD-ROMs containing digital video and links to internet resources.*

### Step 1: Software Installation

Using the CD-ROMs requires two free software programs: Acrobat Reader and QuickTime. The “**Internal Discussions: An Appointment in gastroenterology**” has the most recent information regarding software on the file entitled, “*Begin.*” It contains the following information, but also has active links to the sites mentioned.

**Acrobat Reader:** If you need to install Acrobat Reader 5.1, go to [www.adobe.com/products/acrobat/alternate.html](http://www.adobe.com/products/acrobat/alternate.html) Adobe Reader 6 is also available. At this time, it does not support playing video in slow motion, or pausing the video once it is playing, which is why we suggest using Acrobat Reader 5.1

(Macintosh OS X users need to have Acrobat Reader 5.1 installed. Released October 2002. Adobe Reader 6.0 was released in 2003.)

**QuickTime:** You need QuickTime 5 or better installed. (QuickTime 6 is more dependable in playing the video in a high quality fashion.)

If you need to install QuickTime 6, go to: [www.apple.com/quicktime/download](http://www.apple.com/quicktime/download). (When installing QuickTime, be sure to choose the Recommended installation, and not the Minimum one. Choosing Minimum will prevent the captioned video from working.)

### Action Moment:

Insert the **Internal Discussions** CD, and locate the *Begin* file on the CD. Open it and follow instructions for software installations for both programs using the links provided in the file.

### For Users with Adobe Reader 6:

If you have already installed Adobe Reader 6, you can still use Acrobat Reader 5.1. Your computer can run both programs. To use Acrobat Reader 5.1, you need to open up that program first. (In Windows, there should be a shortcut on your desktop. In Macintosh, the Acrobat Reader folder will either be on your Hard Drive (OS 9) or in your Applications folder (OS X.) Once you open the program, then use File>Open to select GI.pdf on the CD entitled GI\_Discussions. You can also choose to uninstall Adobe Reader 6. Then, when you click on the PDF file, it will automatically open up in Acrobat Reader 5.1

*The best configuration of software is Acrobat Reader 5.1 and QuickTime 6. If you know you have these programs installed, you can skip the section on Software Installation.*

### For Users with a Dial-up Connection:

If you have difficulties downloading the installers, you can order “Here’s How: A Tutorial and Sampler” created by Digiterp Communications. This has QuickTime 6 and Adobe Reader 6 and Acrobat Reader 5.1 for both Windows and Macintosh, and is available from [www.digiterp.com](http://www.digiterp.com).

If you have this CD, you may need to find the Acrobat Reader 5.1 installer in a folder other than the one suggested for your Operating System. Windows users should use the installer in Windows 98 folder. Macintosh users should use the installer in OS 9.1-10.2.x (Adobe Reader was just released when that CD was produced, so there was not time to discover the changes in how Adobe Reader 6 functioned compared to Acrobat Reader 5.1.)

## Step 2: Working with PDF Files

All of the information and video on the CD-ROMs are accessed through Portable Downloadable Files (PDFs) that are readable with Acrobat Reader. In many ways, PDF files are like interactive books, containing text that you can read (and print out) as well as links which play movies, guide you through the PDF, and take you to resources on the internet. In this step, you will learn techniques for maneuvering through the PDF file to access the necessary information.

### Opening the PDF file.

First of all, you need to locate the CD-ROM. Windows users should click on “My Computer.” Macintosh users should click on the CD icon on their desktop. When you open up the CD, there is one PDF file that you will see. On **STOMACH THIS!**, it is entitled *Stomach*. On **Internal Discussions**, it is entitled *GI*. It will have an icon somewhat similar to this picture. (The actual icon varies depending on your operating system and version of Acrobat Reader.)



### Action Moment:

Insert the **STOMACH THIS!** CD and locate the PDF file entitled *Stomach*. Click on it to begin.

### Navigating the PDF file.

#### Option 1: Bookmarks



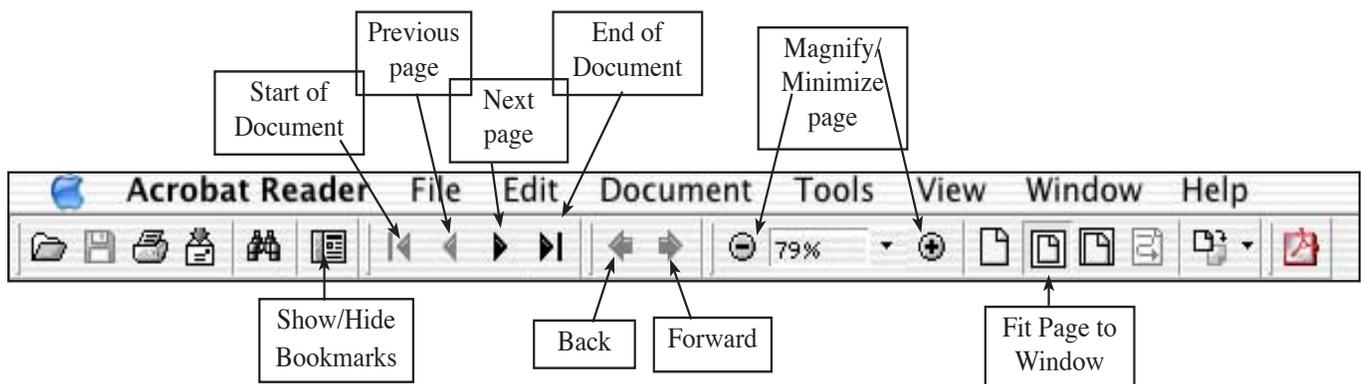
There are a series of options for moving around the PDF file. Initially, what may be the easiest is to use the Bookmarks. By clicking on the tab in the upper left corner of the window (like the one pictured to the left), you will reveal a series of links. Clicking on any of those links will take you to the page indicated.

#### Option 2: Internal Navigational Links

The CDs also have a series of links that you can use. Arrows at the bottom of each page take you to the next or previous pages. Also, some text gives you the instructions to click to move to certain places, similar to the way hyperlinks function in a web browser. The Table of Contents is set up in this way to function in the same way that the bookmarks function.

#### Option 3: Use the Toolbar

The toolbar at the top of the page also allows you to move through the page in the same way that you can navigate the internet with a web browser. The diagram below shows the different functions of buttons.



### Action Moment:

Use the Bookmarks tab to view these links. Practice moving around within the file to certain locations.

## Step 3: Working with the Video

### Opening Videos

**STOMACH THIS!** has four options for opening the same video. Clicking on the picture will play the video the same size as the picture. **2x** will play a video at 640x480 resolution. **Max** will play full screen assuming your monitor resolution is at minimum 1028 x 768. **QT** opens the video directly in QuickTime.



**2x**      **Max**  
**QT**

### Action Moment:

Go to “Meet the Instructors” on page 5. Practice playing the video of Cara’s introduction in the different formats to see which will be most effective for your system.

Because of the volume of video clips on **Internal Discussions**, there are less options, and pictures are not used to indicate links. Below is an example of a set of links from page 15 of **Internal Discussions**.

### Check-In

Clicking here will open the movie in its regular size.

### Large

Clicking here will open the movie in the largest size possible for your monitor settings.

### Captions

Clicking here will open the captioned version of this video clip.

### Playing and Pausing Movies with Control bar

The image below is the control bar at the bottom of the video screen. To pause a movie while it is playing, click on the pause button at the left of the bar. The two bars will then change to a triangle which you can click to make the movie play again. You can also use the SPACE bar for both functions. (*The space bar only serves this function in Acrobat Reader 5.1. Adobe Reader 6 will not allow this, which is why we recommend Acrobat Reader 5.1.*) You can also click on the control bar to move to that point in the movie. This functions as immediate fast forwarding or rewinding.



### Closing Movies Early

Some movies last over 10 minutes. In order to close a movie before it is finished, simply press the *esc* button in the upper left corner of the screen. This technique is necessary for video formatted for consecutive interpreting, as the video window remains open even after it stops playing.

### Movies in Slow Motion

To play the movies in slow motion, click on the **Right arrow** (→) on your keyboard. Mac users simply need to hold it down. Windows users need to tap it. See the sample movie clip to see how it slows down the video. Releasing the arrow key makes the movie pause. (*The arrow key only serves this function in Acrobat Reader 5.1. In Adobe Reader 6, the arrow key plays in fast forward, which is why we recommend Acrobat Reader 5.1*)

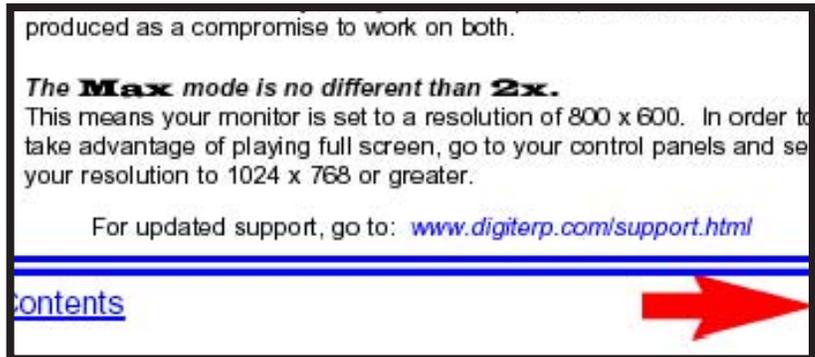
### Opening Movies in QuickTime

**STOMACH THIS** offers the option of opening the video in your QuickTime player. This has the added benefit of showing the Time Code and offering simple resizing. When you click on the link, a dialogue box will pop up asking you if it is OK to open the application QuickTime Player. You should allow this as the file is safe.

## Step 4: Working with Resources on the Internet

This next step simply insures that you can use the internet links to access further information.

The first web link on the STOMACH.pdf is at the bottom of page 3 on “Using this CD-ROM.” It has a link for updated support ideas on the CD-ROMs created by Digiterp Communications in partnership with the RSA Region V Project.



### Action Moment:

On the bottom of page 3 of STOMACH.pdf, click on the link to : [www.digiterp.com/support.html](http://www.digiterp.com/support.html).

Clicking this link should launch your web browser. You may get a dialogue box asking you if you want to view the file within Acrobat Reader or in your web browser. You should choose your web browser. Depending on your connection to the internet, you may need to dial in first before clicking on the link. Once you are able to make the connection to the internet, it means that any other links should automatically launch your browser and take you to the appropriate location on the internet.

### Troubleshooting

This is the end of Lesson 1. Hopefully, you will now feel more comfortable in navigating the files, viewing the video, and connecting to the internet. If you experience any difficulties, follow these steps.

1. Check the “Using this CD” and “Troubleshooting” pages on the CD itself. This has answers to many frequently experienced problems. Most of them can be resolved by ensuring that you have Acrobat Reader 5.1 and QuickTime 6 installed. (**Internal Discussions** has more up-to-date information.)
2. Visit the Support Page for Digiterp Communications. As new problems (and solutions) are discovered, this page is updated to reflect the most current understanding of the best ways to work with these CDs. There is also contact information on this page if you do not see the answer to the question you have. The URL for this page is: [www.digiterp.com/support.html](http://www.digiterp.com/support.html).

## Working in an Academic Setting: STOMACH THIS!

The next three lessons of this study packet focuses on working in an academic setting--meaning how the digestive system would be addressed within a classroom setting. This emphasis is on developing knowledge of the *anatomy* and *physiology* of this system. (*Anatomy* is used to refer to the structure of organs. *Physiology* refers to the functions of organs.) In them, there are references to page numbers which come from the PDF file entitled STOMACH which is on the CD. In Lesson 1, you worked with this file, and as you move forward, be prepared to work with it more in-depth.

### Lesson 2: Predicting and Preparing

**Objective:** *In this lesson, you will predict and prepare for lectures on digestive system in an academic setting by:*

- a. *drawing on prior knowledge in generating a list of what might be included in discussion of the digestive system.*
- b. *using suggested websites, or your own resources, to do preliminary research on the digestive system.*
- c. *filling in a diagram showing the organs of the digestive system.*

#### Step 1: Prediction

In this first step, you will draw on prior experience and knowledge to prepare for working with the lectures contained on **STOMACH THIS!**

#### Action Moment:

Using a blank sheet of scratch paper, write down some ideas of what you think might be included in a lecture on the digestive system. You may also draw a diagram to try to engage the visual portion of your brain. Think of both the anatomy and physiology, that is both what structures (organs) might be talked about and what processes and functions might be explained.

*Context:* The lectures on **STOMACH THIS!** are offered at two levels. The warm-up lecture provides a lesson at the high school level. The Technical lecture is provided at the undergraduate level. Depending on which level you plan to work with, you might make different predictions.

#### Step 2: Preparation

Now that you have made predictions, do some research to confirm how much you know and to fill in some of the gaps of your knowledge. Start with page 6 of *STOMACH.pdf*. It has a list of terms used in the lectures, as well as a labeled diagram of the digestive system.

#### Action Moment:

Work with the two weblinks on page 6. The first, from the National Digestive Diseases Information Clearinghouse, offers a clear, basic explanation of the digestive system and is a good starting point.

The second link, from the Student Center for Anatomy and Physiology, offers a more in-depth look. Once you get to the Index page, choose *Chapter 25: The Digestive System* from the drop down list at the top of the page. This is designed to accompany a text book but offers lots of resources, including other internet activities, tests, and quizzes. It is up to you to determine how much of this you want to use for preparation now, but recognize that these are some future resources which you can use.

## Step 3: Labeling a Diagram of the Digestive System

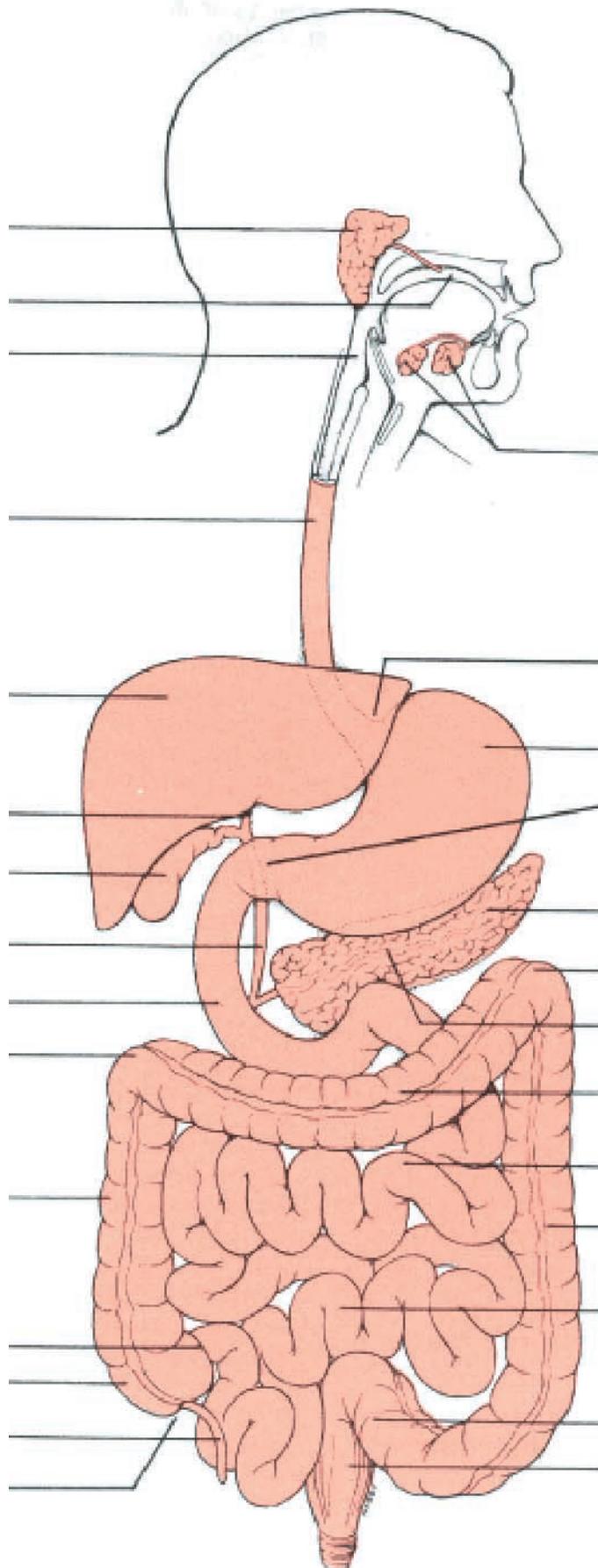
Given the importance of a knowledge of anatomy in terms of being able to visually represent the digestive system in ASL, test yourself in labeling the diagram on the next page. This is the same diagram used on **STOMACH THIS!**, but with the labeling removed. So, you can use the diagram from the CD to check how much of the digestive system you are able to identify.

### Online Extra:

For interactive online activities, visit the Labeling Activities portion of the *Student Center for Anatomy and Physiology*. You can follow the link from the **STOMACH THIS!** CD or you can type in the following site.

<http://www.mhhe.com/biosci/ap/saladin2e/student/olc/chap25labeling.mhtml>

This page has a list of 10 labeling activities. The first covers the entire system and is the most general. The others focus on anatomical structures of portions of the system, moving from the upper to lower portions. They are good opportunities to test your knowledge, and also give you immediate feedback in terms of correct answers. To get correct answer, simply click in the box for that item in the Correct Answer column.



## Lesson 3: Describing the Digestive System in Your Native Language

This lesson focuses on working with the lecture on the digestive system in your native language.

**Objective:** *In this lesson, you will deepen your understanding of anatomy and physiology of the digestive system in your native language. by:*

- a. *watching model lecture in your native language,*
- b. *creating a content map,*
- c. *analyzing text for salient linguistic features, and*
- d. *retelling the lecture in your native language.*

### Action Moment:

This process is broken down into a series of steps. Steps 1-3 need to be done together.

#### Step 1: View/Listen to Model Lecture

View/listen to the entire warm-up or technical lecture in your native language. Depending on your prior knowledge of the topic (as well as the amount of time you have) choose the appropriate lecture. If in doubt, start with the warm-up lecture to gain familiarity with the process.

#### Step 2: Create Content Map

After the lecture is complete, create a content map by writing down or drawing important concepts and ideas, and using lines to show the relationship of ideas. You can also create a simple outline.

#### Step 3: Generate List of Salient Linguistic Features

Salient linguistic features represent significant items within the text that contribute significantly to the meaning. Some examples might be sentence structure, use of space in ASL, particular vocabulary choices, or vocal inflection. (For more in-depth instructions on Content Mapping and Salient Linguistic Features, see the Independent Study Packet on *Analyzing Discourse* available for free download from [www.digiterp.com/parallel.html](http://www.digiterp.com/parallel.html).)

#### Step 4: Take a Break

*Take a break* of at least an hour and preferably a day. This allows you to disengage from the words of Paul or the signs of Cara so what you produce in the next step can be authentically yours.

#### Step 5: Re-tell Lecture

Re-tell the lecture in your native language. You can use a variety of memory aids. Use your content map or outline that you developed. You can choose to use a diagram either from the CD or the one on the previous page of this packet. Whatever support you have, attempt to give a lecture similar to the one which Paul or Cara gave.

### Evaluation Opportunity:

Videotape yourself retelling this lecture. Watch/listen to your retelling and do steps 2-3 from above. See if you were able to include similar concepts and linguistic features to what you felt were included in the source lecture on **STOMACH THIS!**

## Lesson 4: Describing the Digestive System in Your Second Language

**Objective:** *In this lesson, you will deepen your understanding of anatomy and physiology of the digestive system in your second language. by:*

- a. *watching model lecture in your second language,*
- b. *creating a content map,*
- c. *analyzing text for salient linguistic features, and*
- d. *retelling the lecture in your second language.*

### Action Moment:

This process is broken down into a series of steps. Steps 1-3 need to be done together.

### Step 1: View/Listen to Model Lecture

View/listen to the entire warm-up or technical lecture in your second language. Depending on your prior knowledge of the topic (as well as the amount of time you have) choose the appropriate lecture. If in doubt, start with the warm-up lecture to gain familiarity with the process.

### Step 2: Create Content Map

After the lecture is complete, create a content map by writing down or drawing important concepts and ideas, and using lines to show the relationship of ideas. You can also create a simple outline.

### Step 3: Generate List of Salient Linguistic Features

Salient linguistic features represent significant items within the text that contribute significantly to the meaning. Some examples might be sentence structure, use of space in ASL, particular vocabulary choices, or vocal inflection. (For more in-depth instructions on Content Mapping and Salient Linguistic Features, see the Independent Study Packet on *Analyzing Discourse* available for free download from [www.digiterp.com/parallel.html](http://www.digiterp.com/parallel.html).)

### Step 4: Take a Break

Take a break of at least an hour and preferably a day. This allows you to disengage from the words of Paul or the signs of Cara so what you produce in the next step can be authentically yours.

### Step 5: Re-tell Lecture

Re-tell the lecture in your second language. You can use a variety of memory aids: your content map or outline that you developed; a diagram from the CD; or the diagram on the previous page of this packet. Whatever support you have, attempt to give a lecture similar to the one which Paul or Cara gave.

### Evaluation Opportunity:

Videotape yourself retelling this lecture. Watch/listen to your retelling and do steps 2-3 from above. See if you were able to include similar concepts and linguistic features to what you felt were included in the lecture on **STOMACH THIS!** For Deaf interpreters, you can also compare your written re-telling to the original transcript.

### For Deaf Interpreters

Unfortunately, when this CD was produced, we did not have the possibility of creating captioned video. To work with the English lecture, print out the transcript of the lecture. (pp. 22-26 of STOMACH.pdf)

For Step 5, you can choose to create an English re-telling either by signing in an English-like manner or by using written English.

## Working in a Clinical Setting: Internal Discussions

The next ten lessons represent a change from an academic setting to a clinical one. On **STOMACH THIS!**, the focus was on the functioning of a healthy digestive system. In the next ten lessons, which work specifically with **Internal Discussions**, the focus will turn to a digestive system which is not functioning correctly and attempting to determine what needs to be done to get it back in balance.

### Software Check:

**Internal Discussions**, having higher quality video, requires updated software. Working with **STOMACH THIS!**, using QuickTime 4 or 5 works. If in working with **Internal Discussions**, the video does not play or stutters, upgrade to QuickTime 6. (See Lesson 1 for details on how to do that.)

### Action Moment:

Place the **Internal Discussions: An Appointment in Gastroenterology** CD in your computer. Click on *GI.pdf* to begin working with it.

### About **Internal Discussions: An Appointment in Gastroenterology**

This CD was produced specifically as an opportunity to apply knowledge developed in **STOMACH THIS!** in a more clinical setting. It offers you the opportunity to be the interpreter for a medical appointment, as well as view the work and perspectives of Nancy Niggley, an interpreter who works full-time in medical settings. Through this blend of practice and observation, you will be able to develop your own capacity for managing appointments like this and applying your understanding of the digestive system in real-life settings. (You can read a more detailed overview on page 6 of *GI.pdf* on the *GI\_Discussions* CD.)

## Lesson 5: Prediction and Preparation for an Appointment in Gastroenterology

**Objective:** *In this lesson, you will predict and prepare for an appointment in gastroenterology by:*

- a. predicting what situations might be encountered, and*
- b. researching, through internet resources provided, or your own research, what procedures and conditions might be encountered in a clinical appointment.*

### Step 1: Prediction

You just received a request to interpret for a gastroenterology appointment. In addition to the time, location, and name of consumer, you also were told that the Deaf person is being seen because she has *anemia*.

### Action Moment:

On a separate sheet of paper, predict what might be talked about during this appointment. Focus not only on what anatomy and physiology might be talked about, but also what procedures might be used and what causes and diseases might be suspected. In addition, think about the physical set-up of an examination room and potential dynamics between the patient and health care provider.

### Step 2: Preparation

Now that you have a list of predictions, do some research to prepare yourself.

### Action Moment:

Go to page 9 of *GI.pdf* which has a variety of links to the internet. Some links may have more application to *anemia*. Take some time to review the written information as well as the diagrams showing some of the anatomy which might be expected to be discussed.

## Lesson 6: Checking In

**Objective:** *To practice handling check-in for a medical appointment when patient is not present or identified by:*

- a. developing and rehearsing your own professional introduction, and*
- b. incorporating suggestions from an experienced interpreter in medical settings.*

In this brief lesson, you get the opportunity to practice your introduction to a registrar. Often at medical appointments, interpreters do not know the Deaf person they will be working with, and need to check in at the registrar to see if the Deaf patient has already checked in. In doing this, there are strategies for making check-in more efficient and effective.

### Action Moment:

Go to page 15 of *GI.pdf* on “Handling Check-In,” and follow the steps below.

### Step 1: Making an Introduction

Review the information provided on page 15 of *GI.pdf*:

For this setting, you have received the following information from the referral service:

**Appointment time:** 1:30 PM

**Name of Patient:** Mary Dykstra

**Name of Physician:** Dr. Olson, a gastroenterologist

**Symptoms:** Anemia

Given this information, go ahead and practice your check in with the receptionist at the desk by clicking on a video link on the CD. You may wish to videotape your introduction for evaluation (explained below.)

### Step 2: Interpreter Perspectives

After practicing your introduction, watch Nancy Niggley share her perspectives on checking in. Then read the paragraph below the link for that video.

### Step 3: Incorporate New Ideas:

Try handling the check-in a second time, this time keeping in mind the points suggested by Nancy.

### Evaluation Opportunity:

In doing this twice, videotape yourself doing both, and then compare your introductions. Both will be brief, but this evaluation gives you an opportunity to see how effective and professional your introduction is.

### Another Tip:

More places of business are requesting interpreters to wear picture ID badges. These can be helpful in distinguishing you as a professional as opposed to a patient. For examples of these badges, visit: [www.IDmatters.biz](http://www.IDmatters.biz), a business run by an interpreter in Minnesota.

## Lesson 7: Interpreting the Appointment in a Consecutive Format

**Objective:** *In this lesson, you will develop understanding of consecutive interpretation by: consecutively interpret an appointment in gastroenterology:*

- a. *reading about the relationship between simultaneous and consecutive interpretation, and*
- b. *interpreting with video formatted to pause after each turn in the interaction.*

You are now moving into interpreting the appointment for Mary Dykstra. While her appointment was with Dr. Olson, the appointment you will see is actually with Mary Jane Harrington, who is the Lead Nurse in the Gastroenterology Department for HealthPartners Clinic. The actual appointment is delivered in three different formats. The first is for consecutive interpreting; the second is to observe the actual interpretation during filming; and the third is for simultaneous interpreting.

### Action Moment:

Go through steps 1-5 described below. Working without time constraints is an important step in being able to work more effectively with an interaction that you were not present for.

### Step 1: Understanding the Relationship of Consecutive and Simultaneous Interpreting

Go to page 13 of *Gi.pdf* and read the information on “The Relationship of Consecutive and Simultaneous Interpreting.” If you desire, you can download Debra Russell’s complete article, which is referenced on this page, from CIT’s website. <http://www.cit-asl.org>

### Step 2: Testing Video Format

Go to page 14 to make sure you are able to close the video effectively. Unlike other video, the window will not close automatically. This is to allow you to watch the video in its entirety and then have a picture of the Deaf consumer while you create your interpretation. To close the video, you need to hit the *esc* key in the upper left corner of your keyboard.

### Step 3: Meeting the Deaf Patient

On page 16, you get the opportunity to meet Mary Dykstra before going on to interpreting the appointment.

### Step 4: Consecutive Interpreting—Gathering Background Information

The appointment is broken up into two parts. In the first, Mary Jane Harrington gathers background information on Mary’s condition. This section is 2:43 in length and is divided into 24 separate clips.

### Step 5: Consecutive Interpreting—Describing Recommended Procedures

This second section occurs after an imagined visit with Dr. Olson. (Not filmed due to logistical constraints.) In this section, Mary Jane Harrington describes the procedures that the doctor has prescribed. This section is 6:51 in length and is divided into 32 separate clips.

### Working Consecutively

In this format, the video pauses after each turn. In other words, each time the speaking switches between the patient and the nurse, the video freezes on the screen. This allows you the opportunity to listen to the entire segment and then create an interpretation without having a time constraint.

### For Deaf Interpreters

Going into ASL, work from the captioned version of the video. For going from ASL to English, you can create a more English form of signing, or you can create a written translation. The format allows you to choose how much time you wish to use in creating an interpretation.

## Evaluation Opportunity:

Videotape your interpretation. Using the salient linguistic features you identified in working with **STOMACH THIS!**, evaluate how effectively you were able to incorporate these features in this interpretation. Some questions to consider:

- How effectively were you able to use spatial descriptions of the anatomy and procedures?
- How well did you pair classifier descriptions with fingerspelling for concepts which have no established signs?
- List portions of the interaction or concepts that were particularly challenging to interpret. (This section is important for the next two portions of the process.)

**Lesson 8: Observing an Interpreted Interaction**

**Objective:** *In this lesson, you will develop understanding of an interpreted appointment in gastroenterology by:*

- a. *developing a framework for observation, and*
- b. *observing a model interpretation.*

The interpretation for a medical appointment of this nature is very dependent on the actual interaction which takes place. The fact that you were not present at the filming of the appointment means you will not have access to all of the factors which influenced the course of communication. This lesson seeks to provide you with a broader understanding of what took place in the interaction with the purpose of both learning from the example of an interpreter experienced in working in medical settings, and in developing your own capability of analyzing what occurs in an interpreted interaction.

**Step 1: Developing a Framework for Observation**

Before observing the interpretation, it is important for you to have an idea of what you are looking for. Essentially, a framework for observation serves as a “lens” with which to gain a deeper understanding of the situation. Looking with different lenses can offer new insights into the situation and effective ways to manage it as an interpreter. This means that observing the interpretation can be done more than once provided you use a different framework or focus on different features.

**A Vygotskyan Framework (A Starting Point)**

As described in the opening section on Pedagogical Framework, this type of observation is based on your personal experience and may be the first one you wish to use. Since you have had the opportunity to interpret the appointment, look at specific portions or concepts to see how Nancy manages them in her interpretation. Working with the list of challenges you developed in evaluating your own interpretation, watch to see what Nancy does in those situations. Here is an example of an observation using this framework:

**The Importance of Observation**

Carol Patrie, in her series on *Interpreting in Medical, Legal, and Insurance Settings*, discusses how critical observational learning is in preparing to learn through direct experience. She uses the example of “aspiring surgeons” who are required to observe hours of surgery before performing the surgery themselves. So, too, interpreters can benefit from watching the work of other interpreters. Observations can be even more effective if we look in systematic ways. There are several effective possible frameworks. The one suggested here, which was developed by Dr. Melanie Metzger, focuses on features of interpreted interaction. Another framework which can be used is the Demand-Control Schema developed by Robyn Dean and Robert Pollard. It’s important to note that these different frameworks are not competing ideas, but serve as “lenses” which allow us to see different parts of the complex reality of interpreted events.

<b>Working with Object: Your Challenges</b>	<b>Working with Other: Observing Model Interpretation</b>	<b>Working with Self: Insight for Future Application</b>
Ex: In Gathering Background Information, section 7, I struggled with conveying the concept of “over-the-counter.”	In that situation, Nancy chose to sign MEDICINE and then fingerspelled, “O-V-E-R-T-H-E-C-O-U-N-T-E-R” This seemed to get an appropriate response from the Deaf person.	In an actual interpretation, I could fingerspell it and then watch for feedback from the Deaf person if they needed the fingerspelling expanded upon.

Appendix A has a reproducible form you can use to undertake this type of observation.

## Analyzing Features of Interpreted Interaction

Pages 20-21 of *GI.pdf* suggests a framework for observation developed by Dr. Melanie Metzger. In this, Dr. Metzger suggests different strategies interpreters use in managing the features of interpreted interaction. In this process, it is important to first identify the feature of interaction which might present a challenge, then what strategy the interpreter uses to manage the situation. Finally, you can evaluate the effects that the interpreter's choice had on the interaction. For those familiar with the Demand-Control Schema, this fits very well with Dean and Pollard's explanation of Demands, Controls, and Consequences. Below is an example using this framework, couched both in the language of Metzger, and Dean and Pollard.

<b>Feature of Interaction (Demand)</b>	<b>Identified Interpreting Strategy (Control)</b>	<b>Consequence for Interaction</b>
<i>(Turn-taking)</i> During description of prepping for exam, Mary raises hands, as if desiring to sign, but the nurse continues to speak, and Mary drops her hands	At next natural pause in the nurse's description, Nancy voices, "Uh, I have a question."	Mary gets the turn to ask her question. She gets her turn without seeming impolite by interrupting in the middle of the nurse speaking.

Appendix B has a reproducible form you can use to undertake this type of observation.

### Step 2: Working with Gathering Background Information, Observe the Model Interpretation with Vygotskyan Framework

To begin, go to page 22 of *GI.pdf* and work with the first section of the interaction, "Gathering Background Information." Print a copy of Appendix A. Transfer the list of your challenges from working with the situation in a consecutive format in the first column of the form. Watch the Model Interpretation paying particular attention to how Nancy handles the particular challenges you identified in your own work.

### Step 3: Working with Gathering Background Information, Repeat Observation by Analyzing Features of Interpreted Interaction

Now that you have attended to the specific challenges you identified out of your own experience, go on to analyzing the features and strategies of interpreted interaction using the framework based on the work of Melanie Metzger. If necessary, re-read pages 20-21 on *GI.pdf* on the CD to familiarize yourself with her ideas. Then, print a copy of Appendix B and watch the model interpretation looking for the features of interaction, interpreting strategies, and consequences for the interaction.

### Step 4: Working with Describing Recommended Procedures, Repeat Steps 2 and 3.

Observe the second portion of the interaction, "Describing Recommended Procedures," using both the Vygotskyan framework and the one focused on Analyzing Features of Interpreted Interaction.

### Step 5: Watch Interpreter Perspectives

Watch both the introduction to Nancy Niggley and her reflections "On the Interpretation." See if this additional information provides any insight to what you observed.

## Lesson 9: Interpreting the Appointment in a Simultaneous Format

**Objective:** *In this lesson, you will simultaneously interpret an appointment in gastroenterology by working with the appointment with the same timing between turns as occurred when it was filmed.*

Now that you have had an opportunity to observe the interpreted interaction as it was filmed, you are more prepared to interpret the interaction in a simultaneous manner. You had the chance to see the ways that Nancy controlled the tempo of the interaction to assist her interpretation, and understand more fully what the nurse and the Deaf patient were responding to. With this preparation, you can go on to interpret the appointment using the same time format of the original filming.

### Action Moment:

Go to page 23 of *GI.pdf* and work with the two portions of the appointment presented on that page.

### Step 1: Simultaneous Interpreting—Gathering Background Information

The appointment is broken up into two parts. In the first, Mary Jane Harrington gathers background information on Mary's condition. It is the same video you worked with in Lesson 7, but runs continuously instead of being divided into a series of turns between the nurse and patient.

### Step 2: Simultaneous Interpreting—Describing Recommended Procedures

This second section occurs after an imagined visit with Dr. Olson. (Not filmed due to logistical constraints.) In this section, Mary Jane Harrington describes the procedures that the doctor has prescribed.

### Evaluation Opportunity:

Videotape your interpretations. Using the challenges which you identified from your consecutive interpretation of this situation, evaluate how effectively you were able to manage these situations. A couple of questions to consider:

- In this interpretation, were you able to incorporate some of the effective strategies used by Nancy Nigglely?
- How effectively were you able to manage the timing of the continuous video? Were you able to successfully pause the video to allow time for your interpretation?
- What areas continued to present challenges?

### On Simultaneous Interpreting

The term, simultaneous interpreting, may in fact be a misleading one. Given the mental process of interpreting, it is impossible to actually interpret any source message at the same time it is produced. There is inevitably a certain delay between the production of a message and its interpretation. Lauri Krouse, an interpreter educator from Minnesota, describes this process as "rapid consecutive interpreting."

In reality, what the term simultaneous interpreting used here really denotes is a diminished control over the timing of the interaction. Nancy, in the interaction, is able to apply certain controls which manage turn-taking and allow her more or less time for certain concepts to be conveyed. In this format, the video runs with the time frames established by the original interpretation. However, you are not stuck with this timing. **You can pause the video if desired by using the space bar to allow yourself more time for your interpretation.**

Given your opportunity to view the original interpretation, I hope you will be more adequately prepared to deal with these time constraints.

## Lesson 10: Interpreting Video in Patient Education— Consecutive Format

**Objective:** *In this lesson, you will develop competency for interpreting informational video used in patient education by:*

- a. *preparing for a video on procedures used in gastroenterology, and*
- b. *interpreting video formatted to pause throughout its duration.*

Clinics often make use of videos to educate patients about certain procedures. The next three lessons focus specifically on incorporating what you have learned so far with video similar to the type that might be used for preparing a patient to have an EGD and Colonoscopy. The video used features Mary Jane Harrington explaining the two procedures in the actual room that is used at HealthPartners Riverside. It is an opportunity for you as an interpreter to see the equipment and setting, as well as to practice interpreting.

### Action Moment:

Go to page 24 of *GI.pdf*. Imagine that you are working with Mary, the patient from the appointment and she has been asked to view a video explaining the two procedures she will undergo: an EGD and a Colonoscopy.

### Step 1: Prepare for the Video.

It is important before any assignment to spend some mental energy predicting and preparing. For this situation, at minimum, take 2-3 minutes to prepare by predicting what might be included on the video. Doing this step quickly, and without resources other than your memory, is a good practice to establish, which you can also use during actual appointments.

### Step 2: Interpret the Video in a Consecutive Manner.

Work with the video links on page 24 of *Gi.pdf*, “Interpreting Video in Patient Education.” This video is 7:49 in length and is divided into 19 sections.

### Working Consecutively

*A Reminder:* In this format, the video pauses after a certain segment of the video. The length of each segment on shown by each part. This format allows you the opportunity to listen to the entire segment and then create an interpretation without having a time constraint. You can also begin interpreting while the video is playing and continue to complete your interpretation after the video has paused.

### Evaluation Opportunity:

Videotape your interpretation. Using the salient linguistic features you identified in working with **STOMACH THIS!**, evaluate how effectively you were able to incorporate these features in this interpretation. Some questions to consider:

- How effectively were you able to use spatial descriptions of the anatomy and procedures?
- How well did you pair classifier descriptions with fingerspelling for concepts which have no established signs?
- List portions of the interaction or concepts that were particularly challenging to interpret.
- Are there any challenges that are unique to working with video? How were you able to incorporate the visual examples on the screen into your own interpretation?

## Lesson 11: Observing Interpretation of Video

**Objective:** *In this lesson, you will develop competency for interpreting informational video used in patient education by:*

- a. *observing a model interpretation of the video, and*
- b. *comparing the work of the model interpreter with your own work in a consecutive format.*

This lesson focuses on learning from the work of Nancy Niggley. On page 26 of *GI.pdf*, Nancy models an interpretation in a simultaneous format and also shares some perspectives on how she works with video in actual patient education. Subsequent lessons look at how a Deaf and Hearing team work together. It may not be something that is frequently used in clinical settings, but the people working on this project felt it offered a unique opportunity for Deaf interpreters to have a resource designed with them specifically in mind.

### Action Moment:

Go to page 26 of *GI.pdf* and then go through these three steps.

### Step 1: Developing a Framework for Observation

As was discussed in Lesson 8, having a framework for observation is important to being able to apply your observations in a meaningful way. In watching Nancy's interpretation on page 26, I'd suggest using the Vygotskian Framework as shown in the form in Appendix A.

Using the list of challenges you created in evaluating your own interpretation from the consecutive format (Lesson 10), fill in the first column of the form in Appendix A.

### Step 2: View Nancy's Sample Interpretation of the Video

Watch Nancy's interpretation on page 26 of *GI.pdf*. Notice how she manages the sections which you found to be challenging.

### Step 3: Interpreter Perspectives

On page 26 of *GI.pdf*, watch Nancy's perspectives on working with video in patient education.

### Moving Ahead for Deaf Interpreters:

Lesson 12 focuses on creating a simultaneous interpretation of this video. You can continue on and work with this lesson, using the captioned video. Or jump to Lesson 13 which demonstrates the work of a Hearing-Deaf Team. Lesson 14 allows Deaf Interpreters the opportunity to work from an ASL feed for interpreting this video.

## Lesson 12: Interpreting the Video in a Simultaneous Format

**Objective:** *In this lesson, you will develop competency for interpreting informational video used in patient education by interpreting video formatted to run continuously.*

Now that you have had an opportunity to observe the interpreted interaction as it was filmed, you are more prepared to interpret the interaction in a simultaneous manner. You had the chance to see the ways that Nancy controlled the tempo of the interaction to assist her interpretation, and understand more fully what the nurse and the Deaf patient were responding to.

With this preparation, you can go on to interpret the appointment using the same time format of the original filming.

### Action Moment:

On page 26 of *GI.pdf*, you will be working with the video on the bottom portion of the page entitled, “GI Overview.”

### Step 1: Mental Rehearsal

Since you have already interpreted this in a consecutive manner and viewed a model interpretation, mentally go over any segments of the text which were challenging or any portions of Nancy’s interpretation which you would like to include in your own.

### Step 2: Simultaneous Interpreting—GI Overview

On page 23 of *GI.pdf*, work with the video of the “GI Overview.” ***Remember that you can use the space bar to pause the video if necessary during your interpretation.***

### Evaluation Opportunity:

Videotape your interpretations. Using the linguistic features identified in working with **STOMACH THIS!** and the challenges which you identified in this situation in a consecutive format, evaluate how effectively you were able to manage these situations. A couple of questions to consider:

- What linguistic features were you able to incorporate into the interpretation?
- In this interpretation, were you able to incorporate some of the effective strategies used by Nancy Nigglely?
- How effectively were you able to manage the timing of the continuous video? Were you able to successfully pause the video to allow time for your interpretation?
- What areas continue to present challenges?

### On Simultaneous Interpreting

On page 21, there is a description of the way that simultaneous interpreting does not mean instantaneous interpreting. If desired you can read that again to refresh your perspective on approaching this lesson. The important thing to emphasize is that **you can pause the video if desired by using the space bar to allow yourself more time for your interpretation.**

## Lesson 13: Observing a Deaf-Hearing Team Create an Interpretation

**Objective:** *In this lesson, you will gain insight Deaf-Hearing team interpreting by observing an interpretation created by a Deaf and Hearing team.*

After filming Mary Jane Harrington giving the description of the procedures used in gastroenterology, I realized that it provided an opportunity to show the work of a Deaf interpreter (and provide opportunities for Deaf interpreters to practice with this material.)

This next lesson focuses on the results of that idea. Cara Barnett, who you will remember from **STOMACH THIS!**, worked with Nancy Niggley to create an interpretation. Although this type of interpreting is not necessarily what would be used in a clinical setting, it is similar to what Deaf interpreters do in conference settings. The team working on this project felt it was worth including this opportunity for Deaf interpreters. We hope you will agree.

### Action Moment:

Go to page 27 of *GI.pdf* and prepare for observing the interpretation created by Cara Barnett and Nancy.

### Step 1: Developing a Framework for Observation

As was discussed in Lesson 8, having a framework for observation is important to being able to apply your observations in a meaningful way. In watching Cara and Nancy's interpretation on page 27, I'd suggest using the Vygotskian Framework as shown in the form in Appendix A. Using the list of challenges you created in evaluating your own interpretation from the consecutive format (Lesson 10), fill in the first column of the form in Appendix A. You may also want to look for some of those linguistic features you noted in **STOMACH THIS!**, particularly how Cara uses space for her descriptions, how she combines fingerspelling and classifier use to convey the ideas of the videotape, and what features she adds to her interpretation that are not present in the feed from Nancy.

### Step 2: Observe the Interpretation Created by Cara Barnett and Nancy Niggley

On page 27 of *GI.pdf*, watch the interpretation created by Cara and Nancy. At this point, do not work with the links under the heading "For Deaf Interpreters." That comes in the next lesson.

### Step 3: Watch Interpreter Perspectives

On page 28 of *GI.pdf*, Cara and Nancy both share perspectives on creating an interpretation. In Cara's reflections, she gives an example of her inaccurate use of space in the interpretation (and how she did it in her first attempt).

## Lesson 14: Creating an Interpretation from an ASL Feed

**Objective:** *In this lesson, you will create an ASL interpretation from an ASL feed.*

This next section was developed particularly with Deaf interpreters in mind. After having worked with the video in a consecutive format, and watching Cara's interpretation, it's your turn to create an interpretation of your own.

### Action Moment:

Go back to page 27 of *GI.pdf*. Find the heading "For Deaf Interpreters" and go through the next two steps to work with the options there.

#### Step 1: Select Your Feed

On page 27 of *GI.pdf*, you have two choices of an ASL feed to work with. The first is the actual feed Cara used in creating her own interpretation. To use this one, you need to know the material of the videotape well because Cara knew the information thoroughly. Because of this, she creates her interpretation based partly on Nancy's feed, and partly on her own knowledge. The other choice is to work with the Interpretation by Nancy Niggley. This is a more complete source, but has less pausing. You can try working with both and see which is more manageable.

*You should also remember that you can use the Space Bar to pause and play the video to give your more control over the timing of creating the interpretation.*

#### For Hearing Interpreters

While this was designed specifically for Deaf interpreters, working with an ASL feed can be something which we encounter. Frequently in conference settings, interpreters may be called on to copy sign comments from audience members. Further, it might be a skill required in working with individuals who are DeafBlind. So, just because it was designed for Deaf Interpreters, don't let this opportunity pass you by.

#### Step 2: Create an Interpretation

With whichever feed you choose, use it as a source message for creating an interpretation.

### Evaluation Opportunity:

Videotape your interpretation. Using the linguistic features identified in working with **STOMACH THIS!** and the challenges which you identified in this situation in a consecutive format, evaluate how effectively you were able to manage these situations. A couple of questions to consider:

- What linguistic features were you able to incorporate into the interpretation?
- In this interpretation, were you able to incorporate some of the effective strategies used by Cara Barnett?
- How effectively were you able to manage the timing of the continuous feed? Were you able to successfully pause the video to allow time for your interpretation?
- What areas continue to present challenges?

## Lesson 15: Reflections on the Process

**Objective:** *In this lesson, you will synthesize your learning by reflecting on your work throughout the entire process and projecting how it might apply to your actual interpreting work.*

Congratulations! You have made it through all of the lessons. Hopefully, you will have found this to be helpful in your own professional development. Before putting this aside, please take some time to reflect on what you have learned in working with these *bite-sized pieces* and what you think you will be able to carry with you in your work as an interpreter.

### Action Moment:

There is great educational value in the cycle of action and reflection. Throughout the first 14 lessons, you have put new ideas into practice. In your own individual professional development, the step of reflection is a key to being sure that you are able to integrate this new learning into your ongoing work. So, for this action, take a moment to reflect.

### Step 1: Create a Reflection

Whether in written English or in ASL on video, record some of your reflections on what you learned in working with this packet. Here are some questions you might consider in creating your reflection, but do not limit yourself to these:

- What did you learn about the anatomy and physiology of the digestive system?
- What new insights did you gain about interpreting interaction?
- Did your perspective on the relationship between simultaneous and consecutive interpreting change at all in working with this packet? If so, in what ways?
- What were some examples from the language and interpreting models that impressed you as being particularly effective? How well were you able to include them in your own work?
- What did you learn about your work by evaluating your own interpretations?
- What new resources did you identify which will be helpful in your future work?

### Step 2: Share Your Feedback

The RSA Region V Project has supported the development of this Independent Study Packet to further the professional development of interpreters. In doing this, the project is very interested in your feedback about this packet, both in terms of what worked well and what you think could be improved upon. Please share any feedback you have on this packet or the CD-ROMs by contacting the RSA Region V Project at [federalprojectinfo@stkate.edu](mailto:federalprojectinfo@stkate.edu).

### Final Words

Good luck to all of you as you go on to work on your own. I sincerely hope that the activities and ideas shared in this packet will be of benefit to you in your professional development. There are a tremendous variety of independent skill development resources for interpreters, including the CD-ROMs produced by the RSA Region V Project. I hope that your working with this packet will inspire you to continue on your path of providing the highest quality services to the people with whom you work.



## References

- Bowen-Bailey, D. 2002. *Analyzing Discourse*. Duluth, MN: Digiterp Communications. <http://www.digiterp.com/parallel.html>
- Metzger, M. "Interactive Role-Plays as a Teaching Strategy," in Roy, ed. (2000) *Innovative Practices for Teaching Sign Language Interpreters*. Washington, DC: Gallaudet University Press.
- Patrie, C. 2002. *Interpreting in Legal Settings*. San Diego: DawnSignPress.
- Patrie, C. 2002. *Interpreting in Medical Settings*. San Diego: DawnSignPress.
- Russell, D. "Reconstructing Our Views," in Swabey, ed. (2002) *New Designs in Interpreter Education: The Proceedings of the 14th National Convention of the Conference of Interpreter Trainers*. CIT. <http://www.cit-asl.org>

## About the Author

**Doug Bowen-Bailey** is an interpreter, educator, and resource creator who lives in Duluth, Minnesota. His primary background is working in a variety of educational settings as an interpreter. Upon the birth of his children, he became a *stay-at-home Dad* who turns out to not be very good at staying home. He currently works as an Interpreter Training Consultant with the Northeast Service Cooperative providing mentoring services to interpreters in educational settings and interprets in a variety of community settings.

He is a graduate of Macalester College and St. Paul Technical College. He also completed an on-line program on Teaching ASL and Teaching Interpreting through the University of Colorado-Boulder, and recently completed a Distance Learning Technology Internship through the DO IT Center at Front Range Community College in Colorado.

Through his business, Digiterp Communications, Doug has been involved in creating a diversity of quality and affordable resources for professional development for interpreters. He has also presented on a variety of topics related to interpreting, including the process of creating digital resources at the 2002 Conference of Interpreter Trainers.

He lives with his wife, Holly, and their two children, Sylvie and Frost. Ironically, during Doug's research on internet resources on the digestive system for the **Internal Discussions: An Appointment in Gastroenterology** CD, Frost, at the ripe old age of 3, burst his appendix and provided a whole new opportunity for Doug to learn about the digestive system.

## Acknowledgements

This packet is the result of a myriad of collaborations, and though it is impossible to document all of the individuals who went into shaping this project, I do want to thank some specific people for their significant support.

First of all, I want to thank the members of the RSA Region V Project team for their support and collaboration in so many efforts. Laurie Swabey, Paula Gajewski, Richard Laurion, and Rosa Ramirez have all been extremely supportive in this project. In addition, I'd like to thank Sherri Lancton of the DO IT Center who gave me some very helpful feedback as part of my Distance Learning Technology Internship and Emmanuel Garcia who was my partner in the DLTI for his support and encouragement. Finally, I would like to thank all of the people who participated in the creation and production of the CDs on which this study packet is based: Todd Tourville, Cara Barnett, Paul Bottenhoff, Nancy Niggley, Mary Dykstra, and Mary Jane Harrington.

**Appendix A**

**A Vygotskyan Framework for Observation**

Working with Object: Challenge from Consecutive Interpretation	Working with Other: Observation of Model Interpretation	Working with Self: Insight for Future Application

*This framework is driven by your evaluation of working with the situation in a consecutive format. What you view as challenges from your own interpretation guides what you look for in the observation.*

**A Framework for Observation Focused on Analyzing Interaction**      **Appendix B**

<b>Feature of Interaction (Demand)</b>	<b>Identified Interpreting Strategy (Control)</b>	<b>Consequence for Interaction</b>



**Appendix D: Independent Study Plan for RID's CMP/ACET Program**



# Independent Study Plan



Note: All Independent Study Activity Plans must be approved by a RID Approved Sponsor *prior* to the onset of the activity.

CMP Participant Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: _____	RID Member # _____	
Fax: _____	E-mail: _____	

**1. What do I want to do?** *Briefly describe the activity you will complete for CEUs.*

Using two CD-ROMs, **STOMACH THIS!** and **Internal Discussions: An Appointment in Gastroenterology**, I propose to work through the Study Packet, "Bite-Sized Pieces," developed by the Region V RSA Interpreter Education Project.

**2. Why do I want to do it?** *Personal needs? Professional growth? Skill enhancement in a specific area? Increased general knowledge? Remaining current in the field? etc.*

I wish to develop my skills for interpreting situations discussing the digestive system, both in academic and clinical settings.

**3. What are my specific goals?** *Keep your goals measurable, observable, tangible!*

My goals for this independent study are to:

- Install necessary software and navigate CD-ROMs containing digital video and links to internet resources.
- Analyze linguistic features in an English and ASL lecture on the digestive system.
- Describe the structure and functions of the digestive system in English and ASL.
- Identify resources for further research on anatomy, physiology, and medical issues related to the digestive system.
- Interpret spoken English presentation on procedures used in gastroenterology in both a consecutive and simultaneous format.
- Handle checking in for a medical appointment in an efficient manner
- Identify sociolinguistic features in an interpreted interaction
- Interpret for an interactive appointment in gastroenterology in both a consecutive and simultaneous format.

**4. How will I accomplish my goals?** *Briefly describe your action plan.*

Using this study packet, I will go through the process of studying the digestive system, and descriptions of it in both ASL and English. I will then apply what I learn in a clinical setting at an appointment in gastroenterology. I will interpret in a consecutive format, observe a model interpretation, and then interpret in a simultaneous format.

**5. How will I show my sponsor what I learned?** *Describe your evaluation process.*

I will document the time spent on this packet using the Time Documentation sheet in Appendix C. In addition, I will share my final reflection which I create in Lesson 15 with the Approved Sponsor.

*(Negotiate with your sponsor what evaluation procedure will fulfill their requirements for processing the CEUs.)*

**6. How many CEUs is it worth?** *Remember, in an educational setting, 10 contact hours = 1 CEU. Consider how much time you will devote to this study. A maximum of 2.0 CEUs can be earned for each project. (Larger projects may be broken into components and each component filed as a separate independent study project earning up to 2.0 CEUs each.)*

Working with this study packet has a value of up to 2.0 CEUs, depending on the amount of time spent studying and learning in this process.

*Please Note: It will be up to the individual RID Approved Sponsors to determine the amount of time necessary to complete your Independent Study and the CEU value which should be assigned to your efforts. Some sponsors may require that you document 1.5 or more hours of study for each .1 CEU earned. Negotiate this with you Sponsor prior to initiating your independent study plan.*

I agree to implement the Independent Study Activity as outlined in this plan and to submit all the necessary documentation of successful completion to my Sponsor. I certify that this activity for CEU credit toward the RID CMP requirements represents a valid and verifiable Continuing Education Experience that exceeds routine employment responsibilities.

\_\_\_\_\_  
**Participant's Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Participant's Signature**

I will insure that this Independent Study Activity will be overseen and evaluated by individual(s) with the relevant expertise. I, or my designee, have discussed the Independent Study Activity outlined in this plan with the participant and agree that it represents a valid and verifiable Continuing Education Experience. Further, I or my designee, agree to assess the documentation submitted to me by the participant upon completion of the Independent Study Activity and award the appropriate CEUs if completion is satisfactory.

\_\_\_\_\_  
**Sponsor's Name (please print)**

\_\_\_\_\_  
**Code**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Sponsor's Signature**