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## Book Review: Introduction to Healthcare for Interpreters and Translators

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# Book Review: Introduction to Healthcare for Interpreters and Translators

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*Digiterp Communications*

Crezee, I. (2013). *Introduction to Healthcare for Interpreters and Translators*. Amsterdam, the Netherlands: John Benjamins.

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*Introduction to Healthcare for Interpreters and Translators* (John Benjamins, 2013), by Ineke Crezee, offers a significant contribution that is useful for both interpreter education programs and practitioners with a focus on healthcare. Whereas other works focus more on strategies and programmatic approaches for teaching interpreters about healthcare settings, Crezee's primary intent is to support practitioners in their work; but its organized and accessible format also makes it an excellent resource that educators can use to help acquaint their students with healthcare settings. Perhaps just as important, it is also a resource that students can continue to use after graduation, making it a worthwhile investment.

Interpreters in healthcare settings are often called into situations regarding which they do not have an in-depth knowledge, such as a meeting with a rheumatologist, an appointment with a cardiologist, or a visit to an endocrinologist. Unless interpreters work as part of a large staff, they are generalists in a field full of specialists. Out of this reality comes a need for an effective resource to support the quality of interpreting services for both patient and provider.

Crezee, an interpreter, translator, and educator based at Auckland University of Technology, responded to this need by writing *Introduction to Healthcare for Interpreters and Translators*. In a conversation I had with Crezee about her motivation for the book, she was clear that the idea was not her own. Instead, it came from her students: In 1996, a woman who worked as a Vietnamese-English interpreter approached her and explained the type of book that she was looking for as an interpreter in healthcare settings. Ideally, the student thought, the book would be divided into different specialties, with chapters including an overview of the particular body system, an explanation of Latin and Greek roots in medical terminology that might be employed, common conditions and their signs and symptoms, and procedures or tests that might be used in diagnosis and treatment.

Crezee realized that there was no such resource and decided that she needed to write the book herself. She took on this challenge and originally self-published a book that became a constant companion to numerous interpreters and translators working in healthcare in New Zealand. Crezee's primary mission was to provide a practical resource—both for practitioners and educators—that would help raise the standard for interpreters and translators in healthcare settings. The success of the “Blue Book,” as it was called (because of its cover) by the community of interpreters and translators who used it provided the foundation for this updated edition.

### A Guided Tour

I consider this book to be a “guidebook” for interpreters working in healthcare settings. If you were planning a trip to a foreign country, you would look for a dependable guidebook to help you navigate unfamiliar territory. Similarly, this book provides interpreting students and practitioners with a guide to the unfamiliar territory of the healthcare setting. Crezee's book is more than simply a textbook for those interested in interpreting in healthcare; it is a resource that interpreters can carry with them as support in their professional journey—useful whether it is the first trip into this territory or one of many.

*Introduction to Healthcare for Interpreters and Translators* is written in English. For interpreters working in signed languages, the numerous charts and images are beneficial for the visual forms of communication. Yet the text will be of benefit regardless of the language that is paired with English.

### The Contents

The book is divided into three sections. In Part I, Crezee shares general thoughts on interpreting in general, the need and requirements for interpreting in healthcare settings, considerations on how culture shapes the work interpreters do in healthcare as well as how patients perceive the healthcare experience, and a framework for preparing for medical terminology.

In Part II, Crezee focuses more specifically on healthcare and, in different sections, gives insight into the types of settings and staff that interpreters might encounter:

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- primary physicians/general practitioners
- outpatient clinics and specialist clinics
- hospitals
- emergency departments/ERs
- informed consent
- pre-operative and post-operative procedures
- intensive care
- obstetrics
- child health
- speech language therapy
- mental health
- oncology

Each of these sections contains a description of what might be expected in the setting. Many, although not all, contain “some notes for interpreters and translators,” which provide practical considerations to prepare for working in the setting.

Part III focuses on healthcare specialties. These sections have a consistent format that includes the Latin and Greek roots of terminology one might encounter, the anatomy (structure) and physiology (function) of parts of the body that might be important in these settings, health professionals who might be encountered in the setting, disorders that patients might present, common drugs used, and common investigations or treatments employed.

The specialties addressed are

1. Neurology
2. Cardiology
3. Respiratory system
4. Hematology
5. Orthopedics
6. Muscles and motor system
7. Sensory system
8. Immune and lymphatic system
9. Endocrine system
10. Digestive system
11. Urology and nephrology (The urinary system)
12. Reproductive system

## How to Use This Book

In the opening of Chapter 1, Crezee shares a suggestion for how to use the book. She writes, “Health interpreter educators may want to use the book as a course text, while health interpreters may want to use this book as a reference, checking briefly on anatomy, terminology and most commonly encountered conditions before leaving to interpret in a certain setting.” These two options are helpful to think about. For interpreter education, the book could be a wonderful introduction to what is involved for interpreting in a healthcare setting. A larger benefit, however, is the valuable resource it offers working interpreters.

It is not reasonable to expect that interpreters (whether students or experienced practitioners) will master every healthcare setting they find themselves in. However, a resource like this helps interpreters to effectively prepare for an assignment in a time-limited way. Much of the information contained in the book exists on the Internet, but Crezee has done the work of distilling the information into a much more concise and trustworthy form. She gives interpreters a “temporary mastery” of the information—that is, readers can review a chapter, commit the information to short-term memory, and use it within a short period of time that allows them to be more

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effective in a particular setting. Having the resource at their fingertips means interpreters do not have to commit the time and effort that medical professionals need to gain a more “long-term mastery” for access at a variety of times and settings.

### **Conclusion**

Educators and interpreters alike will welcome Crezee’s contribution. Crezee has done the field a favor by distilling relevant information about healthcare settings and practice into a well-organized and accessible format that both introduces students to healthcare settings and supports interpreters and translators as an ongoing reference.